

Aware Care Limited

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Inspection report

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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

Aware Care Limited is a domiciliary care agency which provides personal care to people in their own homes. At the time of our inspection there were 54 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. Fifty-Two people were receiving a regulated activity from the provider.

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

Staff training was not always up to date. However, we found no evidence this impacted on people and the registered manager was working promptly to improve training compliance.

We have made a recommendation the provider continues to promote full compliance with training.

People spoke positively about the care they received from the staff team and the registered manager.

People were protected from the risk of abuse by staff who were knowledgeable about safeguarding. One staff member said, "We protect vulnerable people from harm and abuse." People's risks were appropriately assessed, and staff had clear guidance to manage identified risks. The provider followed safe recruitment practices, using a comprehensive values-based recruitment process. People received the support they needed to manage their medicines safely. Staff followed infection control practices effectively. One person said, "They [staff] wear their PPE just like when it was COVID times." Accidents and incidents were appropriately reviewed, and lessons learnt were shared with staff.

People and staff spoke positively about the culture of the service and the registered manager. Every person and relative we spoke with knew the registered manager by name. One relative said, "It all just seems very efficient, the whole organisation, we've been very lucky to have found them." The registered manager and staff understood the responsibilities of their role. The provider had quality assurance processes in place to review the quality performance and drive service improvement. Audits were robust, including frequent spot checks on the care provided by staff.

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 (14 September 2019) and there were breaches of regulation. At this inspection we found improvements had been made and the provider was no longer in breach of regulations.

Why we inspected

We carried out an announced focused inspection of this service on 6 August 2019. A breach of legal requirements was found. The provider has now evidenced what they have done to improve.

We undertook this focused inspection to confirm they now met legal requirements. This report only covers our findings in relation to the Key Questions Safe 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.

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

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.

Aware Care Limited

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 two inspectors 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 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 a registered manager in post. The registered manager was also the nominated individual. The nominated individual is responsible for supervising the management of the service on behalf of the provider.

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 16 September 2022 and ended on 29 September 2022. We visited the location's office/service on 20 September 2022.

What we did before the inspection

We reviewed all the information we had received about this service since its last inspection in 2019. We requested feedback from stakeholders, including the local safeguarding and commissioning teams. We used information gathered as part of monitoring activity that took place on 8 March 2022 to help plan the inspection and inform our judgements. We used the information the provider sent us in the provider information return. 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 12 people who used the service and three relatives about their experience of the care provided. We gathered feedback from eight staff members including the registered manager, office manager and care staff.

We reviewed a range of records including; four peoples care plans, risk assessments and medicines records. We looked at two staff files in relation to recruitment. We reviewed a variety of records relating to the management of the service, including policies, procedures and quality assurance records.

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.

Assessing risk, safety monitoring and management

- Staff training was not always up to date and some newer staff had not completed mandatory online training. However, the provider was actively working to improve training compliance and had other ways of assessing if staff were providing care safely. This included a robust induction plan, regular supervision and monthly spot checks. We found no evidence staff failure to completed mandatory training had impacted on people.

We recommend the provider continues to improve training compliance.

- The provider completed a comprehensive assessment plan prior to people using the service. This included identifying potential risks. This plan informed people's care plans, which we found to be person-centred and detailed.
- The provider had completed individual risk assessments relevant to people's needs, and care plans included guidance for staff on how to manage assessed risk.

Staffing and recruitment

At our last inspection the provider had failed to safely recruit staff. This was a breach of regulation 19 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 19

- The provider followed safe recruitment practices and employed staff using a values-based recruitment process.
- The staff team were deployed effectively to meet people's needs.
- Where the provider was not able to obtain two references for staff, they had a detailed induction management plan in place to test the knowledge and practice of staff.

Systems and processes to safeguard people from the risk of abuse

- People were protected from the risk of abuse. People and relatives felt support was provided safely. One person said, "You feel very safe with a well-run service."
- Staff were knowledgeable about different types of abuse and knew what procedure to follow if they had concerns about people's safety.
- The provider had a safeguarding and whistleblowing policy.

Using medicines safely

- People received support to manage their medicines safely. The provider worked with people to support them to self-medicate where appropriate.
- The provider used an electronic system for managing medicines which we found was effectively managed and easily adapted to be person-centred.
- Staff received regular supervisions and competency assessments around administering medicines. One staff member said, "I did online training and shadowing. [Registered manager] was very supportive and observed me giving medication."

Preventing and controlling infection

- People were protected from the risk of infection through appropriate training and staff had access to PPE.
- The provider's infection control policy was up to date.
- One relative said, "They [staff] all wear their PPE."

Learning lessons when things go wrong

- The registered manager reviewed all accidents and incidents and recorded actions taken to improve practice.
- Staff were aware of how to report any incidents and lessons learnt were shared with staff.
- Appropriate actions were taken to mitigate incidents of a similar nature.

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 changed 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

- The registered manager was passionate and committed to providing a caring and person-centred service.
- One person said, "[Registered manager] comes to see me and asks me things, it is really good."
- Staff, people and relatives spoke highly of the registered manager. All staff said they felt supported by the registered manager. One staff member said, "It is so person-centred. [Registered manager] is really focused on the people and is so hands-on. [Registered manager] and [office manager] really go above and beyond."

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 and staff demonstrated a good understanding of their roles and responsibilities.
- Staff were in regular communication with the registered manager and said they were kept up to date about changes.
- There was clear delegation in place at the service and records were comprehensive. This allowed care staff to understand what was expected of them.
- The registered manager was open and transparent and encouraged a culture of responsibility when things went wrong.

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

- The registered manager said they had regular contact with people and relatives. The registered manager was also providing hands-on care to people by choice and to support them during staffing absence.
- Every person and relative we spoke with knew who the registered manager was. One person said, "This is a very well-run service. Very professional, I have no difficulties contacting [registered manager]."
- The provider worked with local services to encourage community engagement for people in the area.

Continuous learning and improving care; Working in partnership with others

- There were systems to monitor the quality and safety of the service. These included audits of incidents, health needs, safeguarding concerns and staff performance.
- Concerns identified in audits were appropriately followed up and discussed with staff.
- The provider completed a 'satisfaction survey' with results showing 100% of responders would

recommend the service to others. The survey scored high in all areas of customer satisfaction.

- The provider worked in partnership with other services to ensure people were receiving appropriate and effective care.
- Prior to the inspection, we received positive feedback from the local authority who had recently completed a staff survey at the service.