

Appleford Homes Limited

Appleford Homes

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

Appleford Homes is a domiciliary care agency providing personal care to people living in their own homes. At the time of the inspection, the service was supporting two people with personal care. 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. The service was supporting adults of all ages; people with physical disabilities and people with learning disabilities or autistic spectrum disorder.

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

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, so people had a fulfilling and meaningful everyday life. Staff supported people to achieve their aspirations and goals.

Right Care

People received kind and caring support. Staff understood and responded to people's individual needs and knew how to protect people from poor care and abuse. The service had enough appropriately skilled staff to meet people's needs. People received care that supported their needs and aspirations, focusing on their quality of life, and following best practice. Staff and people cooperated to assess risks people might face and where appropriate, staff encouraged and enabled people to take positive risks.

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, supporting their aspirations to live a quality life of their choosing. People and those important to them, were involved in planning and reviewing care. The quality of support provided to people, involving the person, their families and other professionals as appropriate was consistently reviewed.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk

Rating at last inspection

This service was registered with us on 18 December 2019 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 ●

Appleford Homes

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 completed by one inspector.

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 20 October 2022 and ended on 8 November 2022. We visited the location's office on 20 October 2022.

What we did before the inspection

We reviewed information we had received about the service since registration. We sought feedback from the local authority and professionals who work with the service. 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 and reviewed a number of records including two people's care plans and daily records, 2 staff members recruitment files, rotas, policies and systems for governance.

We obtained feedback from 3 people and their families who were currently using, or had previously received support from Appleford Homes, to understand their experiences of receiving support. We obtained feedback from members of staff who worked at the service.

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

- People and families felt the service was safely managed. One relative commented, "[Family member] immediately felt safe and happy with [the allocated carer]."
- Staff had completed training in this area and understood their responsibilities to safeguard people. There were policies and procedures to underpin this practice.

Assessing risk, safety monitoring and management

- People's risks were assessed, and action taken to manage these safely. People had individual and environmental risk assessments and care plans which guided staff on action to take to reduce risk.
- The registered manager had regular contact with people to review the care they were receiving both formally and informally.

Staffing and recruitment

- Safer recruitment processes were being followed including checks with previous employers and with the Disclosure and Barring Service (DBS). DBS checks provide details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.
- There were enough staff to meet people's care and support needs.

Using medicines safely

- Arrangements for how staff supported people with any medicines they were prescribed was clearly documented in care plans and records. People were supported to be as independent as possible in taking their medicines and there were clear lines of responsibility to guide the staff supporting them.
- Staff had completed training in this area and there were policies to underpin how people were supported to take their medicines.

Preventing and controlling infection

- There were suitable systems to help prevent and control infection. Staff received training in infection prevention and control. Personal protective equipment (PPE) was being used effectively and safely.
- The provider's infection prevention and control policy was suitable. Staff were clear on procedures to follow.

Learning lessons when things go wrong

- Systems were in place to enable lessons to be learnt if things went wrong. The registered manager was keen to take all opportunities to learn and improve the quality of the service.

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 care and support needs were assessed in line with standards, guidance and the law.
- The registered manager and staff team understood their responsibilities in planning care according to current guidance and legislation. This included NICE guidance and other best practice guidance. This was reflected in people's care records.

Staff support: induction, training, skills and experience

- Staff completed an induction programme when they began working for the service. This included opportunities to shadow more experienced staff, and the required training.
- Staff completed a variety of ongoing training. Staff told us they felt well supported and were able to develop in their role. Training was completed which was specific and relevant to the people the service was supporting.

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

- People were supported to eat and drink according to their needs. People's care plans documented what people liked to eat and drink and the type of support they needed around shopping and preparing meals.

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

- People were supported to access healthcare in a timely manner. People had consistent staff who had built a relationship with them and knew them well. This meant staff were able to quickly recognise when a person was not feeling well and take timely action
- The registered manager liaised with other agencies to ensure people received the external support needed. One person gave examples of how the service had supported and advocated on their behalf with health professionals.

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.

- The registered manager had a good understanding of the requirements of the MCA. People's capacity was assessed, and records demonstrated that people were supported to be as involved in making decisions for themselves as possible. One person told us, "I feel at the heart of everything."
- Records showed people had given consent to receive support from Appleford homes.

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 well treated and supported, respecting equality and diversity.
- Feedback from people and families was very positive. One person told us, "I have never been with a care agency like this before. Staff go out of their way to make things extra special." One relative commented, "They [staff] really go the extra mile."
- Staff were committed to supporting people to have meaningful and enjoyable lives. One staff member said, "We are not rushed. We can take time to provide the support and comfort people need."

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

- People were involved in planning their care. Staff understood what support people needed, and this was documented in their care plans.
- Staff supported people to make day to day decisions about what they wanted from their care and support. This included what they wanted to do, where they wanted to go and what they wanted to eat.

Respecting and promoting people's privacy, dignity and independence

- People's privacy and dignity was respected and promoted.
- Feedback from people and families was very positive. One person said, "They [staff] 100% respect you." One relative commented, "The staff assigned to us was caring, flexible and always reassuring."
- People's personal information was stored securely at the office location. Staff were aware of keeping information safe and data protection.

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 received care that was specific to their individual needs and wishes. Care plans were tailored to individuals wishes and preferences, and records adapted to these. For example, people had individualised daily record paperwork and staff maintained records which demonstrated personalised care was being delivered. All feedback from people and families confirmed that care given was very person centred.

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.

- The registered manager assessed and understood people's communication needs and regularly review guidance about how to meet these needs.
- Information and care plans were developed and produced using formats accessible to the people using the service. We saw examples where people had information in easy read and pictorial formats which allowed that person to both engage in developing their plans for care; and provide feedback about their experiences.

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

- The registered manager took a holistic approach to providing support packages for people. Care plans demonstrated that information about interests, support networks and relationships, and preferences and wishes was sought and used to develop care plans. Staff had clear guidance about how to support people to maintain relationships and follow interests and activities. The registered manager gave examples of how people had been supported in this area.

Improving care quality in response to complaints or concerns

- Systems and processes for managing complaints and concerns were in place. The registered manager was proactive in communicating with people and families using the service, and would respond quickly to any issues raised.
- The service had not received any formal complaints and people confirmed they felt able to raise any issues they had with the registered manager.

End of life care and support

- The service was not providing this type of support at the time of inspection. Staff had completed training in this area and they, together with the registered manager, had a good understanding of how to care for people who needed this type of support.

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

- People and families spoke positively about the service, staff and registered manager. One relative told us, "Right from the start the registered manager and their team were on the ball and dealt efficiently, kindly and professionally to all our needs."
- The registered manager and staff were committed to providing the best possible person-centred care and support for people.

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

- Quality assurance systems and checks were in place to ensure oversight of the service and drive improvements as needed. The registered manager completed a range of checks to make sure the service was meeting people's needs.
- The registered manager was aware of their responsibilities under the duty of candour and around notifying the CQC. They had submitted all required notifications.

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

- People and families were all able to feedback on the service formally and informally. The registered manager spent time with people to gain feedback and a better understanding of people's experience of care.
- Team meetings were held for staff to discuss various subjects and provide any updates. Staff we spoke with said they felt able to feedback to the registered manager at any time.
- The registered manager and staff worked closely with other professionals to promote positive outcomes for people and examples were seen in people's care records.

Continuous learning and improving care

- There was a process of continual improvement and quality assurance in place. This included systems of audits and checks, investigation of any concerns raised and ongoing commitment to good practice guidance.