

S.Janvier Limited

# Apollo Care South Wirral

## Inspection report

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15 June 2018

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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

This inspection took place on 31 May and 15 June 2018. The first day of the inspection was unannounced when we visited the organisation's office; the second day was by arrangement as we visited four people in their homes who were happy to speak with us about the care they received.

Apollo Care South Wirral is a domiciliary care agency. It provides personal care to 30 people living in their own houses and flats in the community. It provides a service to older adults in the geographical area of South Wirral.

The service required and had a registered manager. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.

During our previous inspection in November 2016 we had found a breach of regulation 12 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. The overall rating for the service was 'requires improvement'. Following the inspection, we asked the provider to complete an action plan to show what they would do and by when to improve the key questions; 'Is the service safe?' and 'Is the service well-led?' To at least a rating of good.

At the previous inspection we saw that systems had not always been followed to ensure that staff had been safely recruited. At this inspection we saw that there had been improvements in this area and the service was compliant with all the health and social care regulations. The breaches we identified in October 2016 had been addressed, the overall rating is now 'good'.

People and their relatives told us that they felt safe with the care provided by Apollo Care South Wirral. One person told us, "Their support helps me to stay at home and feel safe." People's care needs were assessed and the times of calls were arranged with them. People told us that the service they received was reliable and flexible to their needs. People told us that the service could be relied upon. If an unforeseeable event occurred and the carer was going to be more than fifteen minutes late the person was contacted by telephone and if needed an alternative carer was arranged.

The service had enough staff to meet the needs of the people supported. Staff told us that they had sufficient time for travel in between calls and to give people the full allocated time for their call. This meant that staff were not rushed and helped to ensure that staff had time to give people the care and support they required.

To ensure the quality of care provided to people the registered manager arranged for unannounced spot checks to be completed

There were procedures in place at the service to safely recruit new staff members. Staff also received training in safeguarding vulnerable adults as part of their initial training along with periodic refreshment of this training. People received their medication in a safe manner.

We saw that appropriate risk assessments were in place in people's care files for different aspects of people's care. The registered manager kept a record of any accidents, incidents or near misses. The record of incidents was detailed and we saw examples of when incidents had been learnt from, information fed back to staff members and actions taken to keep people safe.

Staff members told us that they felt effective, enjoyed and were well supported in their roles. New staff received a thorough induction which included training, reviewing the policies of the service and shadowing an experienced member of staff for a period of time. Staff received training that was appropriate to their role. Staff praised the quality of the training and training opportunities available to them.

People told us they felt well cared for by staff who were kind and patient. There was a caring culture within the service. One person told us, "I don't know what I would do without them. I look forward to them coming, I enjoy their company and know them off by heart."

Staff were vigilant to people's health needs and made appropriate referrals. People were safely supported with their eating and drinking if they needed support with this. We saw that people's privacy and dignity was respected by staff and in the way their service was delivered.

Each person had a care plan that was individualised and contained specific guidance on their needs, preferences and how to keep the person as safe and healthy as possible. People were involved in writing their care plan. We saw that people's care plans were regularly reviewed with them and that on occasions these reviews had led to changes being made to the care plan in response to people's feedback. When we visited people, we saw that their care plans reflected the care they needed.

People were supported to have maximum choice and control of their lives and staff support them in the least restrictive way possible; the policies and systems in the service support this practice. People told us that they were listened to by staff.

The registered manager was knowledgeable about people's support and care needs. She was friendly and showed a personal interest in people. There was a positive culture in the office and amongst staff members. To ensure the quality of care provided to people the registered manager arranged for a series of audits to check the quality and safety of the service being provided. The registered manager also communicated with people making visits to their homes, along with using newsletters and questionnaires.

## 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.

People told us they felt safe with the care they received.

There were procedures and systems in place to ensure that new staff were recruited in a safe manner.

There were sufficient staff to meet people's care needs safely. People told us the service was reliable and they received their calls at the agreed time.

Staff had been trained in and were knowledgeable about safeguarding vulnerable adults.

We saw that appropriate risk assessments were in place and accidents, incidents or near misses were recorded and learnt from.

Good 

### Is the service effective?

The service was effective.

People told us they thought the staff had the right skills for their role and were well trained.

Staff received appropriate training, assessment and ongoing support to care for people well. This included initial training, supervisions, feedback from spot checks and staff briefing meetings.

The service operated within the principles of the Mental Capacity Act 2005. People consent was sought and they were involved in the planning and delivering of their care.

If needed people were safely supported with eating and drinking.

Good 

### Is the service caring?

The service was caring.

People told us they were well cared for and listened to.

Good 

People told us they were treated with dignity and respect.

We saw that many compliments had been received by the organisation.

People told us they were kept informed and up to date by the organisation. They liked receiving a weekly rota of carers scheduled to call.

### **Is the service responsive?**

**Good** ●

The service was responsive.

People told us that their care met their needs. People's needs and preferences were recorded with them as part of an initial assessment and care plan, which was periodically reviewed.

The scheduled call times were planned around people's needs and wishes. People told us that the service was responsive and call times were flexible to their needs.

There was an appropriate procedure in place for the registered manager to respond to complaints.

### **Is the service well-led?**

**Good** ●

The service was well led.

There was a positive and caring culture within the service. Staff spoke positively about the support they received.

The manager ensured that audits and checks of the quality of the service were undertaken. We found these to be effective.

People told us they thought the service was well led. Staff told us that the registered manager was approachable and always helpful.

# Apollo Care South Wirral

## **Detailed findings**

### **Background to this inspection**

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection was planned to check whether the provider was meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

This inspection took place on 31 May and 15 June 2018; the first day was unannounced and the second day was by arrangement. The inspection was completed by an adult social care inspector.

Before the inspection, the provider completed a Provider Information Return (PIR). This is a form that asks the provider to give some key information about the service, what the service does well and improvements they plan to make. We looked at information the Care Quality Commission (CQC) had received about the service including notifications received from the registered manager. We checked that we had received these in a timely manner.

We also contacted the local authority quality assurance team for their feedback.

We visited four people who received care from the organisation. We looked at their care plans and spoke with them about the support they received. We also spoke with one person's relative. We spoke with six members of staff including the registered manager.

We also looked at the staff files of three members of staff and documents relating to the medication administration, health and safety, staff rostering and the management of the service.

## Is the service safe?

### Our findings

People told us that they felt safe with the care provided by Apollo Care South Wirral. One person told us about the staff, "I feel safe with them, they do everything to help you." Another person said, "Their support helps me to stay at home and feel safe." One family member described the care staff as "vigilant" in matters relating to their family members health. They told us, "Mum feels safe with the carers."

There were procedures in place at the service to safely recruit new staff members. The service had a safe recruitment policy which outlined these procedures which were being followed. Applicants filled out an application form giving details of their experience, qualifications and employment history. Those selected attended an interview; the interview used scenario based questions to help ensure that candidates were a good match for the role. References were sought from previous employers or character references if there was not a previous employer to contact. We saw that often staff had a total of four references in their file that had been verified by a senior member of staff. Candidate's identification was also checked to verify their identity, proof of address and their right to work in the UK. The service undertook a criminal record check using the Disclosure and Barring Service (DBS). The DBS carry out checks to help employers make safer recruitment decisions and help prevent unsuitable staff from working with people who use care and support services. If any applicant had a criminal record an appropriate risk assessment procedure was in place.

People's care needs were assessed and the times of calls were arranged with them. Often the calls were based around people's personal care needs, meal or medication times. This meant that reliability was important. People told us that the service could be relied upon. If an unforeseeable event occurred and the carer was going to be more than fifteen minutes late the person was contacted by telephone and if needed an alternative carer was arranged. People we spoke with told us that this was very rare. On the day we visited the office one carer was running fifteen minutes late because a previous person required additional support. We witnessed the next person being called and informed of the delay; the office staff checked that this would not cause the person any problems or concerns. People we visited told us that the staff were reliable. One person said, "They pretty much come on time. It's important for me as I take medication before my meal."

The service had enough staff to meet the needs of the people supported. Staff told us that they had sufficient time for travel in between calls and to give people the full allocated time for their call. This meant that staff were not rushed and helped to ensure that staff had time to give people the care and support they required. The registered manager told us that it was important to them that people got the care time they had been assessed as needing.

Staff files contained a contract and job description along with some of the service's key policies that the staff member had signed as read. New staff were also issued with an employee handbook. This helped to ensure that staff were aware of their responsibilities in their role.

Staff received training in safeguarding vulnerable adults as part of their initial training along with periodic refreshment of this training. Those we spoke with were knowledgeable about safeguarding vulnerable

adults. Staff knew where the safeguarding policy was kept and who to contact if they had any concerns. Staff knew which organisations they could go to outside of Apollo Care South Wirral if appropriate to do so. An assessor from an outside training organisation has recently written to the registered manager praising staff knowledge of safeguarding policy and good practice.

People who were assisted with their medication in some way had this documented in their care plan. People who organised their own medication had an assessment completed to make sure that they were safe to do so. We saw that a record was kept that "blister packed medication" had been administered, but not a record of each individual medication. This is not in line with best practice guidance and we recommended that the registered manager review how medication administration was recorded.

People's care plans recorded that where a person needed support applying a medicated cream, there were clear guidelines for staff. Any application was recorded, so that this was done effectively and safely. We saw that staff who administered medicated creams and medication, periodically had their competency checked to ensure they were safe administering people's medication.

To ensure the quality of care provided to people the registered manager arranged for unannounced spot checks to be completed. As part of the manager's 'spot checking' system we noted that staff arrival times, use of uniform and identification was periodically checked to ensure the service was safe. Spot checks also looked at staff's infection control practices were observed. In particular hand hygiene and the appropriate use of gloves, aprons and any other equipment staff needed to complete their role safely. People we visited told us the care staff use appropriate infection control practices.

We saw that appropriate risk assessments were in place in people's care files for different aspect of people's care. For example, pressure area care and safe moving and handling for people who need support with their mobility. We also noted that individualised environmental and fire risk assessments had been completed for each person. People were supported to use assistive technology so people could alert others if they needed help. One person who had an assistance alarm told us, "Every time the girls leave they check, 'Do you have your button on'".

The registered manager kept a record of any accidents, incidents or near misses. These included a body map if a person sustained any mark, bruise or injury. The record of incidents was detailed and we saw examples of when incidents had been learnt from, information fed back to staff members and actions taken to keep people safe.

## Is the service effective?

### Our findings

People who we visited told us they were happy with the carers who came to visit them. One person said, "They do everything to help you." Another person told us, "The staff help me to stay independent." One person's family member told us that some carers were very interested in understanding their relative's health needs and "used their initiative."

Staff members told us that they felt effective, enjoyed and were well supported in their roles. One staff member had written, "I always leave people's homes feeling proud, because I know I do my best when I'm there." Another staff member told us, "I happy here, I enjoy supporting people to stay in their own homes. It's important if that's where they want to be and it's so nice we can do this." Staff were enthusiastic about their roles and were knowledgeable about people's support needs. One staff member described how they enjoyed helping to support a person to settle back into their own home after experiencing a fall requiring treatment in hospital.

New staff received a thorough induction which included training, reviewing the policies of the service and shadowing an experienced member of staff for a period of time. There were records of the shadow time that new staff had received on their staff files and a shadow checklist ensuring that the new staff member was equipped for the role. We saw that this recorded that staff had received training on any assistive or mobility aids the person may require. Staff told us they benefitted from the shadowing. One staff member said, "The shadowing of senior staff helped me to get to know people, they showed me everything over four visits."

New staff completed a probationary period; we saw that this had been used effectively to ensure that staff were suitable for the role. This helped the registered manager ensure that staff were appropriate for the role.

All staff completed a week of face to face training that was based on the standards of the Care Certificate as recommended by Skills for Care. Skills for Care is a government agency who provide induction and other training to health and social care staff. Staff told us that the training they received equipped them for their role. One staff member told us, "It was outstanding. There was a lot of face to face training and the moving and handling training was very good. We have refreshers of our training and if I feel I needed any further training I would see the manager." Another staff member told us that they had worked as a carer within different services for 24 years. They said, "The quality of the training and support here, is the best I've ever had." Some staff were being supported to complete a diploma in health and social care. These were being facilitated by an outside training organisation. We saw assessments of staff understanding from the training provider that praised their knowledge within social care.

We saw records of formal supervision meetings that carers had with a senior staff member. We were told that staff were asked if they were happy in their role and subjects discussed included work life balance, feeling valued in their role, feedback from people cared for, progression within their role, refreshing safeguarding information, training needs, any new ideas and at times staff were told staff what improvements needed to be made. Staff told us they were useful and helpful to them in their role. One staff

member told us, "They are a good opportunity to catch up with each other and discuss areas for development." Another member of staff told us, "The company is very supportive."

Staff received an annual appraisal of their performance. This ensured that staff were aware of their progress and performance within their role. There were also unannounced 'spot check' observations of staff's practice in caring for people. When looking at people's staff files we saw copies of the spot checks. These checks looked at staff's presentation and punctuality, hand hygiene and infection control, treating people with dignity and respect, health and safety, safe medication administration and how people were supported with their fluid intake and nutrition.

The service had staff meetings which were called 'team briefings'. We saw that these were regular and focused on the care provided to people. There was a person by person update and discussion on people's care needs and how these were currently being met, with areas for improvement discussed.

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 Act 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 be 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. In the case of Domiciliary Care, applications must be made to the Court of Protection. This service operated within the principles of the MCA. People we spoke with told us they were involved in the planning and delivery of their care. People's consent was sought and they were involved in the planning and reviewing of their care plans and any referrals made on their behalf. People also signed to give permission for staff to administer their medication. As part of people's initial assessment, their ability to consent to their care was ascertained.

We saw that staff were vigilant and people were supported with their health care needs and to access medical professionals when necessary. One staff member told us of a recent occasion when they contacted a person's GP after making observations. One person's relative had written positive feedback on staff member's vigilance in the family members health. They praised the staff for "noticing and querying small changes."

People told us that they liked the food that staff prepared for them. People who needed support with their nutrition and hydration, had a nutrition and hydration care plan giving guidance for staff to ensure that people's needs were met safely. One staff member told us that they had recently been on a nutrition training course. They told us that this made them realise how important it was for people to have a variety of food and they were now going to encourage people to eat a more varied diet.

## Is the service caring?

### Our findings

All the people and their relatives we spoke with told us they felt well cared for. Some examples of this included one person who told us, "I don't know what I would do without them. I look forward to them coming, I enjoy their company and know them off by heart." Another person said, "I couldn't do better. I have recommended them as carers."

People told us that they were treated with kindness and patience and their opinions were listened to. One person told us that the registered manager valued their opinion and told them about their carers, "If I didn't like anybody, just tell them. But there hasn't been anybody I don't like. I like them all." One person's relative told us, "Mum has her favourites. But she has good relationships with them all."

We heard in the office that a staff member was calling a person's family member to enquire about their wellbeing as the service user was in hospital. The staff member showed concern and treated the person's relative with kindness. For another person who celebrated their 100th birthday the Registered manager arranged for a bouquet of flowers.

The care staff told us they were happy to be caring for people. They spoke enthusiastically about their roles. One staff member told us, "I like going out to see people; building up a good rapport and bonding with people." Another staff member told us how happy and proud they were that they were able to build up a relationship with a person and gain their confidence. This has enabled them to support the person to have a bath with support. They told us that the person was so happy that they had overcome their anxiety and their family was "overjoyed."

The service had a caring culture. For example, one carer when not in work had saw a person who had dementia and didn't usually go out by themselves crossing the road. A senior member of staff told us how the carer joined the person on their trip to the shops and ensured that they got home safely. Afterward the carer alerted the relevant people and took steps to ensure that this person was safe.

People told us they felt well informed by the organisation and this gave them reassurance. People said they liked receiving a weekly rota showing which staff were due to care for them. If people required information in a particular format this was provided. For example, one person had information printed in a very bold and large print format, so they were able to read it. One person who didn't always recognise people from their names had a photograph index of staff so they knew who was coming to care for them.

We saw that people's privacy and dignity was respected by staff and in the way their service was delivered. People's confidential information was protected in the office, records were made in a respectful way and only necessary information was held. Personal care was provided in a dignified way that respected people's privacy and in accordance with people's preferences.

Apollo Care South Wirral had received a number of written compliments and thank you cards. For example, one person's family had written, "Please thank the girls for their tender care and help." Another relative had

written, "A big thank you for all your care, advice and help looking after mum and dad. Mum always looked forward to her chats with the girls and everyone kept her dignity throughout. I always knew I could count on Apollo to be there for me in times of crisis." A third person's relative wrote, "Thank you so much for looking after my mum with such loving care... you all brought her a lot of happiness and treated her with great respect and dignity."

The service had provided end of life care for people in their own homes. If this was required this was planned in line with the person's wishes and provided in partnership with people's family members and health professionals.

## Is the service responsive?

### Our findings

People gave positive feedback with regard to the responsiveness of the care and support they received. One person told us, "I am really happy. I am listened to and they help me to get out." One person's family member had written in feedback, "I really do think you have helped to get mum back on her feet."

The registered manager told us that it was important for the care their organisation provided to be flexible. One person told us about their care, "If I move the time they are flexible. After a late hospital appointment, they will come and help me with my tea afterwards. They will also come in early to help me get ready for an appointment in the morning. I'm very happy with them."

The organisation had a system in place which they used to schedule people's visits and allocate familiar carers to produce a rota for people. People told us that this system had continued to be reliable. One person said they liked the system telling us, "I know all the carers who come in, you get used to them. I feel safe with them." The rota system took into account the carer's travel times and allocated this on top of the time of the arranged visit. This made sure the carers could spend the full allocated time with each person and did not become rushed.

When new to the service people's care needs and preferences are documented as part of an initial assessment. There was an assessment pack that prompted questions within the care plan which made sure that the service could safely meet people's support needs and preferences. Each area of people's care was assessed asking three questions: What was the care need? What is my desired outcome? And; How can Apollo Care help me to achieve this? This meant that people's plans were positive, individualised to them and met their care needs and wishes. People were also asked what times they needed their care, if they preferred care from male or female staff, older or younger carers. This meant that people's care was person centred from the start.

When we visited people, we saw that their care plans reflected the care they needed. Each plan was individualised and contained specific guidance on the person's needs, preferences and how to keep the person as safe and healthy as possible. We also saw that the care plan contained information on and moving and handling techniques that had been agreed with the person. People told us that they were involved in writing their care plan. We saw that people's care plans contained notes on their background that they wanted to share with carers. If care was also provided by other agencies, for example community nurses or people's family members there was an agreed plan of care document in place outlining what was the responsibility of the service, to provide clear communication.

We saw that people's care plans were regularly reviewed with them and that on occasions these reviews had led to changes being made to the care plan in response to people's feedback.

There were daily logs kept of the care given to each person. There was also a record kept on the computer system of contact between people cared for and Apollo Care South Wirral's office; this was detailed and thorough. This helped office staff and the registered manager keep up to date with events in people's care

and if necessary ensure that information about people was shared, documented and acted upon as appropriate.

The service had a complaints and compliments policy which contained the details of the local authority social services and the Care Quality Commission. There had been a small number of complaints, the registered manager had acknowledged and then responded to these quickly after addressing the concern.

Since our last inspection the office base had moved. The registered manager told us that the office was now, "Right in the middle of all the people we care for." They told us that this helped them to respond if a carer was running late, to any unexpected staff sickness and enabled them to be more responsive if unexpected events happen in the lives of people they care for. A senior member of staff told us of some recent examples when staff from the office has responded to help people. For example, one person had fallen over and was able to be helped quickly, another person smelt a gas leak and a member of staff attended quickly, help out and stayed with the person whilst they waited for help from professionals.

## Is the service well-led?

### Our findings

The registered manager was knowledgeable about people's support and care needs. She was friendly and showed a personal interest in people. We observed that when she called people on the phone they knew who she was and when making visits people were familiar with her. It was clear that she had a positive relationship with people.

Staff members told us that the registered manager was available to help them when they needed support. Staff told us they were confident going to the registered manager if they had a concern. One staff member told us, "She is very reasonable and approachable." Another staff member said, "During our observations she is friendly and approachable. You know you can always go to her."

The registered manager spoke enthusiastically about the quality of care provided to people. She told us it was important that people received a reliable service that was responsive to their needs and wishes and that people enjoyed the care staff coming to visit them.

There was a positive culture in the office and amongst staff members. Staff spoke with enthusiasm about their roles and the company they worked for. One staff member told us, "I enjoy my role. This is the best company I have ever worked for." Another staff member said, "After 16 years in social care. This is probably the best move I've made." A third staff member told us, "I feel appreciated here."

The registered manager arranged for a series of audits to check the quality and safety of the service being provided. These included audits of people's daily care records and records of medication administration. Any medication recording issues were reported on and reviewed with the staff member. The manager had oversight of when people's care plans were reviewed and staff supervisions and training completed. The response to incidents, accidents or near misses was also audited to ensure that appropriate action had been taken.

To ensure the quality of care provided to people the registered manager arranged for unannounced spot checks to be completed. These were completed by the registered manager or another senior member of staff. These spot checks helped ensure that people's care was appropriate, followed their care plan and met their needs. Staff members told us that the feedback they received from these checks was useful to them.

The service used a computerised rota system which helped the registered manager to ensure that every person's call was allocated to a specific carer in an organised way. The system helped to ensure that people received carers that they were familiar with and people's preferences were acted upon. The system also showed the registered manager when tasks were upcoming, due and overdue using a red, amber and green system. This meant that the manager was aware of when staff member's supervisions, appraisals, training and spot checks were due and when people's care plans needed reviewing.

The registered manager communicated to people using newsletters and regular visits to people. The registered manager also sought people's feedback by using questionnaires. We looked at some recent

questionnaires that had been returned. The scores and feedback given was overwhelmingly positive. For example, 92% of people wrote that they felt involved in their care planning, 93% knew how to raise a complaint, 79% said they received care from regular carers and 100% rated the service as good or excellent. On some of the questionnaires people had written positive feedback about staff members. One person wrote, "[Staff name] is always pleasant and chatty. She makes sure I'm comfortable before she leaves." Another person wrote, "All who have visited us are excellent."

The new office location enabled people's relatives to 'pop in' to the office as it was now central in the neighbourhood where the carers worked. The registered manager told us that this enabled them to be more supportive and made it easier for people's relatives who wanted to communicate face to face. There was a friendly atmosphere in the office base, during our visit staff members visited to pick up supplies, give information to senior staff members and to pick up rosters for the upcoming week. The new office opening times were from 7am until 10pm, this was to ensure that a staff member was always available to answer calls and if necessary was ready to respond to emergency situations.

The home had appropriate policies in place. A copy of these were kept in the office and key policies were in the staff handbook. Staff told us they knew how to access the policies. We checked the policies on compliments and complaints, health and safety, infection control, whistleblowing and safeguarding. In some of the policies contact details for outside organisations needed updating and the details of the Care Quality Commission needed adding. We recommended to the registered manager that these were reviewed.

The rating from previous CQC inspection was displayed in the office of the service and on their website. There was also a service improvement plan on display as information for staff members explaining what had been put in place since the previous inspection.

Apollo Care Franchising; which Apollo Care South Wirral is a part of, had achieved a Silver Award from Investors in People for people management. The award recognised, 'A real focus on continuous improvement, which is delivering many positive outcomes for the organisation.'

Recently the Apollo Care group held a Care Conference where people could meet each other and socialise at an award presentation. One person from Apollo Care South Wirral had nominated one of their carers for an award and attended to see the staff member receive their award. The person told us they really enjoyed this experience.