

Jayshouse Park Ltd

# Guardian Angel Carers Banstead and Purley

## Inspection report

17 Station Road  
Sutton  
SM2 6BX

Date of inspection visit:  
22 February 2023

Date of publication:  
08 March 2023

### 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

Guardian Angel Carers Banstead and Purley is a domiciliary care agency providing personal care. The service provides support to people living in their own homes in the community. 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 the service was providing personal care to 6 people.

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

People were safe using the service. Staff understood how to safeguard people from abuse and keep them safe from identified risks to their safety and wellbeing. There were enough staff to support people and meet their needs. Recruitment and criminal records checks were carried out on staff to make sure they were suitable to support people. Staff followed current practice when providing personal care and when preparing and handling food which reduced hygiene risks.

Staff received relevant training to help them meet people's needs. The provider made sure staff had regular opportunities to review and improve their working practices. The provider regularly checked staff were carrying out their duties to the expected high standard.

People were supported to stay healthy and well. Staff helped people to eat and drink enough to meet their needs and to take their prescribed medicines. Staff understood people's healthcare needs and how they should be supported with these. They were observant to changes in people's health and wellbeing and sought support for people when this was required.

People were happy with the care and support they received from staff. They received the care and support that had been planned and agreed with them. Staff were kind and caring and focussed on meeting people's needs and respecting their choices and preferences about how care and support was provided. They supported people in a dignified, respectful way which maintained their privacy and independence. People had a choice about who they received care and support from and the provider made sure this was from the same staff so that care and support was provided in a consistent way.

People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible; the policies and systems in the service supported this practice.

There was no registered manager in post and the service was being managed by the nominated individual while the provider actively recruited for a new manager for the service. However, the service was managed well. The nominated individual was experienced, had a clear understanding of how people's needs should be met and communicated well with people.

The provider had systems in place to monitor and review the safety and quality of the service. They checked

with people at regular intervals that the care and support provided was meeting their needs and sought their views about how the service could improve.

There were arrangements in place to make sure any accidents, incidents and complaints would be fully investigated and people would be involved and informed of the outcome. The provider worked with others to develop and improve the care and support provided to people.

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 7 November 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 ●

# Guardian Angel Carers Banstead and Purley

## **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 team consisted of 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 no registered manager in post. The provider was recruiting for a new registered manager to replace the previous registered manager, who left the service shortly before our inspection.

#### Notice of inspection

We gave the service 48 hours' notice of the inspection. This was because we needed to be sure that a senior staff member would be in the office to support the inspection. Inspection activity started on 22 February

2023 and ended on 24 February 2023. We visited the location's office on 22 February 2023.

#### What we did before the inspection

We reviewed information we had received about the service since they were registered. 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. We used all this information to plan our inspection.

#### During the inspection

We spoke with 1 person and 2 relatives about their experiences of using the service. We also spoke with the senior staff team which comprised of the nominated individual and the care coordinator. The nominated individual is responsible for supervising the management of the service on behalf of the provider. Both the nominated individual and care coordinator were trained and providing care and support to people using the service at the time of this inspection. The service operates under a license as a franchisee of Guardian Angel Carers. We spoke with the quality and compliance manager from the national head office team, who provide the service with support and guidance with quality and compliance standards. We reviewed a range of records including 2 people's care records, records relating to staffing, recruitment, training and supervision and other records relating to the management of 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 were safe using the service. A person told us, "I feel most comfortable and safe with them." A relative said, "I feel [family member] is very safe with them."
- Staff received relevant training and support to safeguard people from abuse. Staff understood how to recognise abuse and how to report their concerns about this. A staff member told us, "I would tell the manager and the local authority."
- The senior staff team understood their responsibility to liaise with the local authority when a safeguarding concern was reported to them. We saw when a safeguarding concern had been raised about a person, they had taken prompt action to make sure plans were put in place to reduce the risk of further harm to them.

Assessing risk, safety monitoring and management

- The provider made sure risks to people's safety and wellbeing were well managed.
- The provider undertook assessments with people to identify risks posed to their safety and wellbeing. This information was used to develop plans for staff about how to manage these risks to keep people safe. We saw for one person, who was at risk of falling, staff were given clear instructions in how to support the person to stay safe when they were moving around their home.
- People said staff understood the risks posed to people and what they should do to manage these. A relative told us, "They are aware that [family member] is in a lot of pain due to an injury and they are very careful...and make sure [family member] is ok when they're looking after [them]."
- Staff had been trained to deal with emergency situations and events if these should arise in people's homes so that they would know what action to take, to keep people safe in these circumstances.

Staffing and recruitment

- There were enough staff to meet the needs of people using the service. Staff were allocated to scheduled care calls well in advance and people were given timely notice of which staff would be attending to provide them with care and support.
- People told us they were supported by a regular team of staff who turned up on time for care calls. A person told us, "The care and support is consistent and they are always on time."
- The provider had an electronic system which they used to monitor care calls in real time. The system alerted the senior staff team if a staff member was running late for a care call so that they could let people know when to expect them.
- The provider operated safe recruitment practices. They carried out checks on staff that applied to work at the service to make sure they were suitable to support people. This included checks with the Disclosure and Barring Service (DBS) who provide information including details about convictions and cautions held on the

Police National Computer. The information helps employers make safer recruitment decisions.

#### Using medicines safely

- Where the service was responsible for this, people received their medicines safely and as prescribed.
- Staff had been trained to administer medicines. They had access to information about people and their prescribed medicines and how they should be supported with these via the electronic system which they could view securely via an application on their phones.
- Staff recorded the medicines people were given and when on the electronic system. Our checks of these records showed people consistently received the medicines prescribed to them.
- The senior staff team used the electronic records system to check at regular intervals, that people received the right medicine, at the stated dose and at the appropriate time.

#### Preventing and controlling infection

- The provider managed infection control and hygiene risks well.
- Staff had received training in how to keep people safe from risks associated with poor infection control and hygiene.
- Staff used personal protective equipment (PPE) effectively and safely.
- Staff supported people to keep their homes clean and hygienic to prevent the spread of infection. A person told us, "They keep everything clean and tidy when they come to visit."
- The provider's infection prevention and control policy was up to date. The provider had plans in place to make sure that infection outbreaks could be effectively prevented or managed.
- Staff had received training in food safety to help them reduce hygiene risks to people when preparing and serving food.

#### Learning lessons when things go wrong

- Learning from accidents and incidents was used to reduce safety risks to people.
- Staff used the electronic system to report and record accidents and incidents involving people, which senior staff then investigated. Senior staff took action when this was needed to reduce the risks of these reoccurring, to keep people safe.
- Learning from investigations was used to help the service improve the quality and safety of the support provided. We saw following an incident involving a person using the service, senior staff met with the person and their family to discuss the incident and what the service could do to reduce the risk of this happening again. Senior staff gave the person and their family information about the risks posed to them and this resulted in the person and their family requesting changes to the care and support provided, to help keep them safe.

# 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 of 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

- The provider made sure people's care and support could be met by the service through detailed assessments of their needs.
- Prior to people using the service senior staff undertook assessments of their needs to make sure these could be delivered in line with current practice and guidance. People and their relatives were involved in these assessments. The provider took account of people's life and medical history, healthcare conditions, their care needs and their choices for how and when their care and support was provided.
- The provider used all this information to plan and deliver care and support people required. People had individualised care plans which set out their choices and preferences for care and support. This helped to make sure staff provided support in line with people's wishes and needs.

Staff support: induction, training, skills and experience

- Staff received relevant training to help them meet the range of people's needs.
- New staff were required to successfully complete a period of induction. During this period senior staff assessed their skills and knowledge to make sure they were competent to work alone with people. A staff member told us, "All new carers have a good induction and shadowing experiences."
- Staff had supervision meetings with senior staff to support them in their role and to identify any further training or learning they might need. Staff were encouraged to achieve relevant qualifications in health and social care to support their professional development. A staff member told us, "I've done all my mandatory training and I'm now doing additional training and working towards level 4 NVQ (National Vocational Qualification Diploma in Adult Care)."
- The senior staff team were in regular contact with staff, often on a daily basis, providing support and advice when this was needed.

Supporting people to eat and drink enough to maintain a balanced diet; supporting people to live healthier lives, access healthcare services and support; staff working with other agencies to provide consistent, effective, timely care

- Where the service was responsible for this, people were supported to eat and drink enough to meet their needs. A person told us, "I get my favourite sandwiches at lunchtime. They know what they are." A relative said, "[Staff member] is a really good cook and [family member] gets nice home cooked meals." Another relative told us, "The carers prompt [family member] to drink and eat as [family member] can be quite forgetful." We saw for one person who was at risk of dehydration, staff were prompted to make sure the person had a water bottle filled and to hand so that they could get enough to drink.
- There was information for staff in people's records about their preferences for meals and drinks. This

helped make sure staff provided people with food and drink of their choice.

- Staff recorded on the electronic system what they had prepared and provided at mealtimes. Senior staff monitored this information to check staff were providing appropriate support and that people were eating and drinking enough to meet their needs.
- Staff alerted senior staff to any changes in people's health and wellbeing. A relative told us, "They are very on the ball and picked up [family member's illness] quickly and called us and we were able to get [family member] help straight away."
- Staff shared information with other healthcare professionals such as the GP and district nurses when needed to make sure people experienced a consistent, joined up approach in the support they received.

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.

- Systems were in place to assess people's capacity to make and consent to decisions about specific aspects of their care and support. There were processes in place where if people lacked capacity to make specific decisions about their care and support the provider would involve people's representatives and healthcare professionals to ensure decisions would be made in people's best interests.
- Staff had received training in the MCA and associated codes of practice and understood their responsibilities under this Act.
- People told us staff sought their consent prior to providing any care and support and respected their choices and decisions about this. A person told us, "I always get asked for my consent." A staff member said, "I will always ask people what they would like me to do and then ask for their consent before doing personal care."

# 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 of 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 looked after well by staff. A person told us, "The staff are good...They are always so cheerful and helpful and it's nice to have someone to speak to." A relative said, "I have seen staff with [family member] and they are so caring. They sit and chat with [family member]. They look after [family member] very well...All the carers are so nice." Another relative told us, "They give care and support to a good standard...They are very kind."
- Compliments received by the service showed people thought highly of the care shown by staff. A relative said, "It gave me great peace of mind to know that [family member] was well supported in my absence."
- Staff spoke about people with warmth and kindness. They knew people well and could explain in detail what was important to people when receiving care and support. They were focussed on putting the needs of people first and respecting their choices and preferences about how care and support was provided.
- People's preferences for who they received their support from were respected. A relative told us, "They took a lot of care to make sure they introduced their carers to [family member] before they came in." Another relative said they had requested only female carers to provide personal care to their family member and the service made sure this need was met.
- People's wishes in relation to how their social, cultural and spiritual needs should be met were recorded so that staff had access to information about how people should be supported with their needs.
- Staff received equality and diversity training as part of their role to help them make sure people were not subjected to discriminatory behaviours and practices.

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

- People were asked for their views and were involved in making decisions about their care. People's care records confirmed this. A person told us, "[Nominated individual] is a nice chap to talk to and very helpful and he listens." A relative said, "We are asked for our opinions by them and we feel they listen to us."
- Once people started using the service, they met with senior staff at regular intervals, so that they could continue to express their views and be involved in making decisions. This helped to ensure the support provided to people was continuing to meet their needs. A relative told us, "We are working together as a team and we do have regular meetings to review how things are going."

Respecting and promoting people's privacy, dignity and independence

- People were treated with respect by staff who maintained their privacy and dignity when providing care and support. A staff member told us, "I make sure blinds and curtains are closed and everything is ready for the person. I personally try and distract people when I'm doing personal care so I try and engage people with conversation to make them feel at ease."

- People's records prompted staff to offer people choice, respect their privacy and dignity and give them enough time to do things at their own pace. This helped to ensure staff would be sensitive to people's needs and discreet when providing care and support.
- People were supported to be as independent as they could be. A staff member told us, "I try and encourage independence so encourage people to wash themselves where they can." People's records encouraged staff to support people to do as much for themselves as they could to help them maintain control and independence over their lives.

# 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 of 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; supporting people to follow interests and to take part in activities that are socially and culturally relevant to them

- People had choice and control over how their care and support was provided.
- People's records contained detailed information about their preferences for how care and support should be provided to meet their needs. Staff understood people's needs and gave us examples of how they provided care and support to people in the way people preferred.
- People's records contained information about their life history and interests to help staff get to know people and meet their needs more effectively. People's records also contained information for staff about the important relationships in people's lives and how people should be supported to maintain these.
- When people wanted changes to the way their care and support was provided, the provider responded promptly to make these. A relative told us, "They are very flexible and work with us closely." Another relative said, "They have been very accommodating and made changes when needed. The service have been very flexible and willing to listen to us and will consider all requests."
- Staff recorded the care and support they provided to people at each care call. Senior staff reviewed these records to make sure people were receiving the care and support planned and agreed with them.

### Meeting people's communication needs

Since 2016 onwards all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard (AIS). The standard was introduced to make sure people are given information in a way they can understand. The standard applies to all people with a disability, impairment or sensory loss and in some circumstances to their carers.

- People's communication needs had been identified, recorded and highlighted so that staff had access to relevant information about how they should be supported with these. A relative told us, "All the carers are so nice. They are communicative and chatty and speak very clearly and this is important when talking to people like [family member]."
- The provider was able to make key information available to people in accessible formats. For example, information was available in large print to make this easier to read. The provider could also access technology that converted written text to speech for people who preferred to receive information this way.

### Improving care quality in response to complaints or concerns

- There were arrangements in place to deal with people's concerns and formal complaints. People had been provided information about what to do if they wished to make a complaint and how this would be dealt with by the provider.
- People told us they would be comfortable raising a concern or complaint if they needed to. A relative told

us they would have no problems making a complaint. However, they had no issues or concerns about the service at this time. They said, "I can't think of anything to complain about."

#### End of life care and support

- Staff had received end of life training to help them provide appropriate support to people if this need should arise.
- None of the people using the service required end of life care and support at the time of this inspection.

# 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 of 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; engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- The provider had set clear expectations about the quality of care and support people should receive from the service. These were communicated to people when they first started using the service. Senior staff then checked with people at regular intervals that the support being provided was meeting their needs and to the standard they should expect.
- The senior staff team were accessible and available to speak with people and staff when needed. A person told us, "[Nominated individual] is a lovely man... a first class chap." A relative said, "They are approachable and we've had lots of meetings with them and that's been really good... [nominated individual] explains things in layman terms and his clinical experience has been so useful to us as well." A relative told us about a recent situation involving their family member and the support provided by the senior staff team to resolve this. They said, "They have been brilliant. They have taken the burden of this situation on and been so supportive."
- Staff felt respected, supported and valued which supported a positive and improvement-driven culture. A staff member told us, "I liked the passion shown when I had my interview with them so it was refreshing and I liked what I saw... There are a lot of opportunities here."
- People were provided opportunities to have their say about the service and how it could improve. The provider responded positively when suggestions were made. Staff were also encouraged to give feedback about how care and support could be continually improved for people.

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

- There was no registered manager in post. They had left their post immediately prior to this inspection. The nominated individual confirmed they were actively recruiting for a new registered manager for the service. In the absence of a registered manager the nominated individual had the skills, knowledge and experience to manage the service in the interim. They had a clear understanding of people's needs and management oversight of the service.
- Staff had clearly defined roles, responsibilities and duties. People's feedback confirmed staff delivered good quality support consistently. A person told us, "I'm very happy with things. I would certainly recommend them. Can't think of anything they could do better." A relative said, "I found them really good. They have gone above and beyond what I would expect from a care agency." Another relative told us, "It takes stress away from us as family as they make everything so easy to deal with."

- The provider had systems in place to monitor and review the safety and quality of the service. This included audits and checks, regular reviews of people's care and a planned rolling programme of spot checks on staff to review their working practices and competency when undertaking their duties. Issues identified through checks were acted on promptly including supporting and encouraging staff to learn and improve their working practices.
- The Guardian Angel Carers national head office team also undertook annual checks of the service to make sure the service was meeting required standards.

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; working in partnership with others

- The provider had systems in place to investigate accidents, incidents and complaints and to make sure people would be involved and informed of the outcome.
- The nominated individual understood and demonstrated compliance with regulatory and legislative requirements.
- The nominated individual gave honest information and suitable support, and applied duty of candour where appropriate.
- The provider worked in partnership with a range of healthcare professionals involved in people's care and support. They acted on their recommendations and advice to plan and deliver care and support that met people's needs and help them achieve positive outcomes.