

Alpha-Imperial Private Ltd

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Inspection report

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31 October 2023

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Ratings

| | |
|---------------------------------|--------|
| Overall rating for this service | Good ● |
| Is the service safe? | Good ● |
| Is the service responsive? | Good ● |
| Is the service well-led? | Good ● |

Summary of findings

Overall summary

About the service

Alpha-Imperial Private Ltd is a domiciliary care agency, providing personal care to people in their own homes. At the time of inspection, 26 people were using the service. 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.

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

At the time of the inspection, the location did not care or support for anyone with a learning disability or autistic people. However, we assessed the care provision under Right Support, Right Care, Right Culture, as it is registered as a specialist service for this population group.

The provider and registered manager had addressed concerns we previously identified at the last inspection. Safe recruitment practices were in place to ensure only suitable staff worked at the service. Systems and processes had been put into place to improve the oversight at the service.

People and their relatives were very satisfied with the personal care staff provided. They said they were treated with respect and dignity and staff had a very caring and friendly approach to them. They said they had very good relationships with staff. Staff respected people's privacy and encouraged them to maintain their independence and do as much for themselves as they wanted to.

Details of how to reduce risks to people's safety were included in people's care plans. Care plans reflected people's individual needs. Enough staff were employed to meet people's needs. People and relatives said safe care was provided, with people protected against abuse, neglect and discrimination.

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 and relatives were aware of how to approach the provider to raise concerns or complaints. The registered manager understood their responsibilities and worked in an open and transparent way. However, we found staff did not always attend calls on time to provide people with the personal care they needed. The registered manager acted on this finding promptly to ensure this was not repeated.

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

Why we inspected

This was a planned inspection based on length of time since last inspection. This inspection was planned based on the information we held on the service.

The overall rating for the service has improved to good based on the findings of this inspection.

Rating at last inspection

This is the 3rd inspection for the service. The last inspection was in November 2019 when the service was rated requires improvement.

Follow up

We will continue to monitor information we receive about the service until we return to visit as per our reinspection programme. If we receive any concerning information we may inspect sooner.

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 responsive?

Good ●

The service was responsive.

Details are in our responsive findings below.

Is the service well-led?

Good ●

The service was well led.

Details are in our well led findings below.

Alpha-Imperial Private Ltd

Detailed findings

Background to this 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 Care Act 2014.

Inspection team

This inspection was carried out by 1 inspector.

Service and service type

This service is a domiciliary care agency. It provides personal care to people living in their own homes.

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.

Notice of inspection

We gave the service 2 days' notice of the inspection. This was because we needed to be sure that the registered manager would be in the office to support the inspection. We also gave time for the registered manager to send us inspection information, so we did not have to spend an extended amount of time in the office of the service.

Inspection activity started on 30 October 2023 and ended on 31 October 2023. We visited the office location on 31 October 2023.

What we did before the inspection

We reviewed information we had received about the service and we sought feedback from the local authority.

During the inspection

We spoke with 4 people who used the service and 2 relatives about their experience of the care provided. We spoke with 3 care staff and the registered manager. We reviewed a range of records. This included 4 care records. We looked at 3 staff files in relation to recruitment and staff supervision. We also reviewed a variety of records relating to the management of the service, including policies and procedures.

After the inspection

We continued to seek clarification from the registered manager to validate evidence found, which was sent to us following the site visit.

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

- People were protected from risks to their health.
- Risk assessments were improved from the last inspection and now covered the potential risks for people and for risks identified in people's homes. For example, for assisting people to move and protecting their skin from damage. One person said, "Staff help me to move and to use the commode and make sure I'm safe."
- Action taken helped to ensure that any risks to people's personal care and environment were identified, prevented and reduced.

Systems and processes to safeguard people from the risk of abuse: Learning lessons when things go wrong

- People were protected from the risk of abuse.
- People told us they felt very safe with staff from the service. One person said, "There is no question I am safe when staff help me."
- Staff members demonstrated they understood how to safeguard people. They were confident the management team would take action if they reported any concerns about people's safety.
- The registered manager was aware of how to report safeguarding concerns to the local authority safeguarding team.
- Processes were in place for the reporting and follow up of accidents or incidents.
- The registered manager said there had been a recent lesson learnt following an incident where it was emphasised to staff they must always carry alcohol gel to disinfect their hands before providing personal care, to protect people from the risk of infection.

Staffing and recruitment

- Sufficient staffing was always in place according to people and relatives. There were no missed calls reported. People and relatives said staff stayed the full time of the call unless they said it was ok to leave and met all their care needs. Two relatives said a small number of calls had been untimely. One relative said this had caused an issue for their family member who went to a day centre. These issues were followed up by the registered manager after the inspection visit.
- Recruitment systems protected people from receiving personal care from unsuitable staff members.
- Records showed evidence good character and criminal records checks had been completed for staff before they began working at the service.
- Assessments and support plans identified the number of staff required to delivery care safely.

Using medicines safely

- Medicine was administered to people safely.
- People and relatives confirmed there had been no problems when staff prompted medicines. One person told us, "I have never missed any of my tablets. There has never been a problem."
- A medicine audit system was in place to check medicines had been administered properly. Staff were trained to administer medicines.

Preventing and controlling infection

- People were protected from the risk of infections.
- People and relatives told us staff had always worn personal protective equipment (PPE) such as aprons and gloves and they regularly washed their hands.
- Staff members described relevant infection control measures that were in place to protect people.
- Staff had received training in infection control, including COVID-19. A lesson had been learned with regard to preventing the risk of infection to people. Staff members told us there was always enough PPE available to ensure people were protected from infection.

Is the service responsive?

Our findings

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

At our last inspection we rated this key question requires improvement. At this inspection, the rating has changed to good. This meant people's needs were met through good organisation and delivery.

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

- People's care was personalised. They had choice and control over the way their care was provided.
- Care plans were improved from the last inspection and now detailed people's personal history such as family, past employment and hobbies. This helped staff understand people's preferences and needs at an early stage.
- People and relatives all said the timeliness of calls was good overall. This was an improvement since the last inspection. They said they enjoyed the company of staff as staff were always friendly, treated them as individuals and respected their independence.

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.

- The registered manager was aware of systems in place to provide information when needed by supplying accessible information by large print, audio and pictures. Currently 1 person was assisted by staff verbally providing information as this is what the person preferred.
- There was evidence in people's care plans reflecting people's communication needs.
- The registered manager was aware of the need to respect people's preferred communication styles.

Improving care quality in response to complaints or concerns

- Complaints had been investigated fully.
- A complaints policy and procedure was in place so complaints were recorded and investigated.

End of life care and support

- End of life care was being delivered by the agency.
- Staff respected people's end-of-life preferences including respect for people's religious and cultural wishes. Personal preferences were also included such the need for curtains to be always open and being in touch with their close relatives so they could be close by and come to see them.
- Other people and relatives said any relevant information relating to end-of-life care would be supplied when they were ready to do so.

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.

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

- People were protected by quality assurance and governance systems. This had improved from the last inspection as there was now full oversight of systems such as medicines management and risk assessments for people's safety. This helped to ensure people's needs were protected and met.
- Systems measured the quality of the care provided by the service. Some of these lacked detail about issues such as timeliness of call times. This was swiftly followed up by the registered manager.
- The registered manager had submitted statutory notifications when needed to keep CQC informed of relevant information such as serious incidents and deaths of people using the service.
- Staff said that training was good and covered all issues of care. Refresher training was provided to ensure they could always meet people's needs.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

- The registered manager engaged with people and relatives.
- There were records showing engagement with people using the service or relatives. For example, when supplying surveys. This showed people rated the service either excellent or good.
- The culture of the service valued people's individuality. People said that staff always asked them how they wanted their care to be provided. One person said, "I receive a lovely service. I look forward to carers coming to see me."
- Another person told us, "It's a brilliant service. I couldn't ask for better."

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 understood their responsibilities under 'duty of candour' to be open and honest when things went wrong, for example, notifying relatives if their family member had an accident or became unwell.
- There had not been any incidents which had met the duty of candour threshold.
- Staff knew how to raise concerns and told us they would report to a relevant agency if they felt their concerns were not acted on.

Working in partnership with others

- People's records evidenced contact with health and social care professionals. For example, referral to district nurses to seek health support for people's conditions.
- The registered manager was aware of the need to work with health professionals to ensure people's needs were met.
- Staff understood they needed to inform the management and people's families if people were ill or had an accident.