

Afadey Homecare Ltd

# Afadey Homecare Ltd

## 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

Afadey Homecare Ltd is a domiciliary care providing the regulated activity of personal care. The service provides support to older people, people living with Dementia, young adults and people with a physical disability. At the time of our inspection there were two people using the service.

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

People received safe care from staff who knew them well. There was a safeguarding policy in place and the registered manager and staff knew how to identify and report concerns.

There were sufficient staff available to support people safely. Staff had the necessary training and experience. Risks to people were assessed, managed and reviewed. Medicines were managed in a safe way. There were infection control procedures in place.

People and their relatives told us staff who supported them were kind and caring and treated them with respect. Staff understood the importance of respecting people's diverse needs and promoting independence.

People were involved in decisions about their care and support. There was a clear commitment and focus on supporting people to develop their independence and choices.

Staff respected people's privacy, dignity and independence and their right to confidentiality. People and family members were encouraged to express their views and opinions and make decisions about the care provided.

People had access to health and social care professionals where required in a timely way. People were supported by staff to maintain a balanced diet where this was part of their care package.

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. Staff were trained and supported to understand their roles and responsibilities.

Auditing and quality assurance processes were in place to enable the service to identify where improvement was needed.

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 30 March 2021 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 ●

# Afadey Homecare Ltd

## Detailed findings

### Background to this inspection

#### The inspection

We carried out this performance review and assessment under Section 46 of the Health and Social Care Act 2008 (the Act). We checked whether the provider was meeting the legal requirements of the regulations associated with the Act and looked at the quality of the service to provide a rating.

Unlike our standard approach to assessing performance, we did not physically visit the office of the location. This is a new approach we have introduced to reviewing and assessing performance of some care at home providers. Instead of visiting the office location we use technology such as electronic file sharing and video or phone calls to engage with people using the service and staff.

#### Inspection team

The inspection was carried out 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 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

This inspection was announced.

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 09 June 2022 and ended on 16 June 2022.

#### What we did before the inspection

We reviewed information we had received about the service since they registered with us. We sought feedback from the local authority and professionals who work with the service. 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

This performance review and assessment was carried out without a visit to the location's office. We used technology such as video calls to enable us to engage with people using the service and staff, and electronic file sharing to enable us to review documentation.

We spoke with the registered manager who was also the nominated individual and one care staff. We also spoke with two relatives of people using the service. The nominated individual is responsible for supervising the management of the service on behalf of the provider.

We looked at a range of documents and written records including two people's care records, one staff recruitment records and information relating to staff training and the auditing and monitoring of service provision. A variety of records relating to the management of the service, including policies and procedures were also reviewed.

We continued to seek clarification from the provider to validate evidence found. We continued to look at records the registered manager shared with us.

# 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 protected from the risk of abuse.
- Staff completed safeguarding training and had access to guidance about the different types and indicators of abuse and how to report any concerns.
- Relatives told us they had no concerns about their relative's safety. They told us they would let someone know if they had any concerns about their safety or the way their relatives were treated. Comments included, "I believe the staff are providing safe care to my relative." And "I feel [person] is in safe hands and I feel 100% confident in the carer."

Assessing risk, safety monitoring and management

- Risks to people's personal safety were assessed, monitored and managed effectively.
- Risk assessments considered risks associated with people's environment, their care and support, mobility and health conditions.
- Regular reviews took place and plans were updated to reflect any changes in people's needs.
- Staff told us risk assessments provided them with clear information about the risks people faced and how to manage them safely. Staff were confident about reporting any concerns about people's safety.
- The provider had a business contingency plan which provided information and guidance on actions staff should take in emergency situations.

Staffing and recruitment

- There were enough staff to meet people's needs safely. People received consistent care from staff who knew them very well.
- Recruitment procedures were safe and thorough. Staff files contained references and other appropriate background checks.
- Relatives told us staff were on time and had enough time to care for people safely. One relative said, "We have not experienced any late or missed calls since the care package started."

Using medicines safely

- People received their medicines by trained staff as they had been prescribed.
- Medicines administration records (MARs) were kept in people's homes. The MARs showed which medicines people were prescribed and when they were given.
- The MARs were returned to the office every month and checked by the registered manager. This helped to ensure any errors were identified and action taken to reduce the risk of them being repeated.

Preventing and controlling infection; Learning lessons when things go wrong

- Safe practices were followed to help prevent the spread of infection including those related to COVID-19.
- Staff received training in infection prevention and control (IPC) and the use of personal protective equipment (PPE) and they were provided with up to date government guidance. The registered manager carried out spot checks to assess staff knowledge and practice in this area.
- People and their relatives told us staff used and disposed of personal protective equipment (PPE) safely. Comments included, "They [staff] always wear the required PPE, we do not have to remind them."
  
- Lessons were learned and shared across the staff team.
- Changes were made to the service based on feedback from people, relatives and staff.
- No accidents or incidents had occurred at the service, however there was a system in place for recording, monitoring, managing and learning from any accidents and incidents.

# 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 received care and support in line with standards, guidance and the law. People's needs were holistically assessed to include their physical, mental and social needs.
- Assessments included people's preferences and details of life histories. This ensured if new staff were to start working for the service, they would know details about the people prior to supporting them.
- Care plans and risk assessments were developed based on the initial assessment and these were reviewed and updated as changes occurred.
- Care plans were individualised and contained information on people's preferred routines and preferences.
- A relative told us, "The registered manager carried out a detailed assessment prior to the start of the care package."

Staff support: induction, training, skills and experience

- Staff had the necessary skills, knowledge and experience to perform their roles.
- Staff were given a thorough induction prior to commencing work, which included completing the Care Certificate. The Care Certificate is an agreed set of standards that define the knowledge, skills and behaviours expected of specific job roles in the health and social care sectors.
- As part of the induction, staff shadowed the registered manager until they felt confident. One staff member told us, "It was very helpful working with [registered manager]. They have been supportive."
- A relative told us, "I think the staff are well trained, they know what they are doing."

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

- People's dietary needs were recorded in their care plans and people were supported to ensure they received good nutrition and hydration where this was part of their care package.
- The registered manager and staff were knowledgeable about people's likes and dislikes relating to food when they discussed people's needs with us.
- Relatives were complimentary about the support their family received. They said, "We are very happy of the support the staff provides to [person]. They also remind [person] to drink regularly."

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

- The service worked collaboratively with healthcare professionals and specialists. A range of professionals were involved in assessing, planning, implementing and evaluating people's care and treatment to ensure

people received the right healthcare. Records confirmed this was the case for ongoing and emerging health issues.

- Referrals were made to other professionals as needed, and this was recorded within people's care plans.

#### 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 service worked within the principles of the MCA.
- The registered manager and the staff we spoke with demonstrated an understanding of the principles of the Act and how to work in people's best interests.
- Consent forms, signed by people who used the service, were included within people's care files.

# 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's rights were promoted, and person-centred care was delivered. People and their relatives expressed their satisfaction with the care provided and made complimentary comments about the staff team.
- The provider promoted equality and diversity. The team was diverse and respectful of cultural differences.
- Staff completed training in equality and diversity and were aware of the importance of treating people equally.
- People's protective characteristics such as their disability and ethnicity were taken into consideration when supporting them. People and staff were matched according to their individual preferences as well as language requirements.
- Relatives expressed their satisfaction with the care provided and made complimentary comments about the staff team. Comments included, "[Person] is proud of her carers; they are young people making a big difference in her life." And "I am very happy with the service and staff. [Person] looks forward to see their carer."

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

- People were encouraged to express their views and make choices and decisions about their care. This was done through care reviews, surveys and telephone monitoring with the registered manager and staff.
- Relatives told us they were involved in decisions about people's care and support. They told us they felt valued and that their opinion mattered.
- People's wishes and preferences were detailed in their care plans and people and their relatives confirmed this accurately reflected the information they had shared.

Respecting and promoting people's privacy, dignity and independence

- Staff understood the importance of respecting people's rights to privacy and dignity and this was supported throughout people's care records. Staff promoted person-centred values and ensured people were treated with dignity and respect.
- People's privacy was promoted by ensuring their information was kept confidential and only shared when necessary, in line with legal requirements.
- Care plans outlined people's level of independence and the importance that this should be promoted whilst offering support.

# 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

- Care was person-centred and reflected people's choices and preferences.
- Care plans and risk assessments were in place to guide staff. These were person centred and had details about what was important to the person. Reviews had taken place with people and their relatives to ensure their needs, goals and wishes were being met.
- Any changes to people's care was updated on their care plan and staff were notified of the changes.

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 service identified people's information and communication needs by assessing them and recording this in their care plans for staff to be aware of how to support the person.
- There was guidance in communicating with people in a manner they could understand.
- The registered manager told us information was available in alternative formats including pictorial and easy read formats, and different languages should this be required by people.

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

- People were supported to avoid social isolation and encouraged to maintain links with family and friends.
- Staff told us they supported people to go out for walks in the local community to help people keep in touch and to be part of the local and wider community.

Improving care quality in response to complaints or concerns

- The service had an appropriate complaints procedure in place.
- People and their relatives told us they knew how to complain but did not have any complaints. They said they could approach staff or registered manager if they had any concerns.
- Relatives told us that they were confident that the registered manager would deal with any concerns in a timely way.

# 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

- We found there was an open culture within the service. The provider had a clear passion and commitment to providing a person-centred responsive service. Staff we spoke with shared this commitment.
- People were supported in a sensitive and kind manner. Feedback from relatives was positive and evidenced they felt included and listened to. People and their relatives spoke very positively about the registered manager and staff. They told us, "They take very good care of [person]." And "They are nice, kind and respectful. They always ask for feedback."
- Staff told us they felt supported and spoke very positively about the work they did and how the service was managed.

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 was aware of their responsibilities regarding duty of candour. They acted in line with the legal requirements to be open and transparent.
- Good relationships had been developed between the registered manager, staff and people who used the service.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements

- The provider had a system in place for monitoring and managing service quality. This included regular audits, spot checks, care reviews and supervisions.
- The registered manager and staff understood their responsibilities for ensuring that risks were promptly identified and mitigated. Risks to people's health, safety and well-being were effectively managed through the review and monitoring of the service.
- The registered manager knew their responsibilities in line with regulatory requirements. They knew to notify CQC of incidents and events occurred at the service.
- Staff understood their responsibilities, they were provided with job descriptions and had access to a range of policies and procedures relating to their work.

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

- People, relatives and staff were regularly asked for feedback about the service through meetings, phone

calls and reviews. This information was used to further develop the service.

- Staff told us their views were listened to and acted upon by the registered manager. Staff said they felt well supported.
- A relative told us, "The manager is approachable and flexible. We have always been able to get hold of the staff or manager when needed."

Continuous learning and improving care

- The service was committed to continuous learning and improvement.
- A number of audits and checks provided information which was used to inform improvements to areas of work, such as record keeping and care delivery.
- Regular surveys were undertaken to gain feedback from people who used the service and their relatives.