

Arielle's Care Ltd

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Inspection report

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Ratings

Overall rating for this service	Good •
Is the service safe?	Good
Is the service well-led?	Good

Summary of findings

Overall summary

About the service

Arielle Care Ltd is a domiciliary care provider. It currently provides personal care to adults and older people in their own homes. At the time of our inspection the service supported 29 people.

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

Arielle Care Ltd provided person-centred care and this was reflected in all the feedback we received about the service. Families told us, "The care is very good, I would definitely recommend them to anybody", "Arielle's are brilliant, open, caring and honest" and "As far as I am concerned, I would give them 10/10 no 11/10."

People, their relatives and staff told us Arielle Care Ltd delivered a safe service. Staff understood how to safeguard people and when to raise concerns. People received their medicines safely and staff followed infection prevention and control guidance to minimise risks related to the spread of infection.

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.

Quality assurance systems were in place to monitor the safety and quality of care provided. The service was relatively new and the registered manager was developing these systems further to ensure the service continued to learn and develop.

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

Rating at last inspection

This service was registered with us on 27 September 2021 and this is the first inspection.

Why we inspected

We undertook this inspection as part of a random selection of services which have had a recent Direct Monitoring Approach (DMA) assessment where no further action was needed to seek assurance about this decision and to identify learning about the DMA process.

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?	Good •
The service was safe.	
Is the service well-led?	Good •



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Detailed findings

Background to this inspection

The inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 (the Act) as part of our regulatory functions. We checked whether the provider was meeting the legal requirements and regulations associated with the Act. We looked at the overall quality of the service and provided a rating for the service under the Health and Social Care Act 2008.

Inspection team

The inspection was carried out by one inspector and an Expert by Experience. An Expert by Experience is a person who has personal experience of using or caring for someone who uses this type of care service.

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

We gave the service 24 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 12 July and ended on 25 July. We visited the location's office on 13 July. We carried out telephone calls to staff on 19 July and we contacted families and relatives on 25 July.

What we did before the inspection

Before the inspection we reviewed the information, we had received about the service. This included CQC

notifications. Notifications describe events that happen in the service that the provider is legally required to tell us about. We used information gathered as part of monitoring activity that took place on 17 May 2022 to help plan the inspection and inform our judgements. We sought feedback from the Local Authority and Healthwatch. Healthwatch is an independent consumer champion that gathers and represents the views of the public about health and social care services in England. This information helps support our inspections. We used all this information to plan our inspection.

During the inspection

We spoke with four people who used the service and four relatives about their experience of the care provided. We spoke with five care staff including the operations manager, the registered manager and three support workers. We received feedback from four health and social care professionals. We reviewed a range of records. This included five people's care records and multiple medication records. We looked at two staff files in relation to recruitment and staff supervision and a variety of records relating to the management of the service, including policies and procedures were reviewed.



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

- Staff had received training in safeguarding and whistleblowing and understood how to identify and report concerns.
- People and their relatives told us the service was safe.

Assessing risk, safety monitoring and management

- Risk assessments were in place to guide staff on how to recognise indicators of risk and what action to take to mitigate the risk.
- Staff told us the risk assessments were clear and gave appropriate guidance to keep people safe.

Staffing and recruitment

- Recruitment systems were in place, but needed a more thorough system, to ensure all the required information was collected and checked correctly. We raised this issue with the registered manager and prompt action was taken during the inspection.
- Staffing levels were safe. People told us there were enough staff. One person said, "They also have time for a chat and a laugh, they do not just rush in and rush out." Staff were aware that some people could be isolated and lonely. One staff member told us, "Yes, they [people] have time to express themselves. This is very important. They can be lonely."

Using medicines safely

- People received their medicines as prescribed.
- Staff who administered medicines had been trained to do so and the registered manager completed competency checks to ensure correct procedures were followed.
- Regular checks and audits were carried out and the digital system alerted staff to events such as late or missed medicines. This meant any issues identified could be immediately investigated and appropriately rectified.

Preventing and controlling infection

- We were assured the provider was using PPE effectively and safely.
- Staff had received training in how to prevent and control infection.
- Staff carried out regular COVID-19 tests to help prevent the spread of infection.

Learning lessons when things go wrong

• At the time of the inspection visit there had been no complaints, safeguarding concerns, whistleblowing

concerns or incidents and accidents. We reviewed systems and processes with the registered manager to ensure they were focused on the need to learn lessons in preparation for any future concerns.	



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; Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- The responses we received from people and their relatives were positive about the culture of the service. These included, "The only thing I have sleepless nights over, is that they might leave us, there is no chance we will leave them" and "As a service they are just what you want, they are brilliant, open, honest and so conscientious."
- The registered manager was committed to both the people who used the service and the staff who worked in the service. The service had a 24-hour telephone helpline for people to use and the registered manager met staff at 7am every morning, in a local supermarket car park before they carried out their visits, to have an informal catch up and to check everyone was okay.
- People and relatives told us the communication with the service was very good. They told us, "Any problems, they are quick to call me and are very responsive" and "If I have any problems, I just ring [registered manager] and he [registered manager] sorts it straight away."
- Staff told us they felt valued and enjoyed working for the service. They told us the service was caring. Comments included, "Yes, the service is caring. They [registered manager] are constantly checking that the service is going well" and "Yes, it is a caring service. I have been shadowing so far. The carers treat people how they would want to be treated themselves".
- Staff received equality and diversity training. Staff delivered care and support in a non-discriminatory way.

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

- Staff were positive about the support they received and told us the induction and training gave them the skills they needed.
- Staff told us the systems were effective. One staff member said, "There is excellent communication from the managers. We do have enough time for visits, and we can inform managers if more time is needed. The systems work fine for me."
- A quality assurance system of scheduled audits was in place. This included spot checks and medicines audits. Competencies of staff were checked. Actions were identified for any shortfalls found.
- This was a relatively new service and the registered manager was trialling new systems and was keen to keep developing the service. They were quick to respond to issues raised during the inspection.
- The statement of purpose accurately reflected the service and the levels of care and support available.
- The registered manager was supported by other key members of staff including an operations manager

and an office administrator. All played their part in ensuring the service provided good quality care.

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 fully aware of their responsibilities under the Duty of Candour. The Duty of Candour is a regulation which all providers must adhere to. Under the Duty of Candour, providers must be open and transparent, and it sets out specific guidelines' providers must follow if things go wrong with care and treatment.
- There had been no circumstances, since the service was registered, where the service had needed to exercise the duty of candour.

Working in partnership with others

- The service had established effective and trusting working relationships with local health and social care professionals.
- The local authority provided very positive feedback about the service. People and their families had reported a high level of satisfaction with the service to them and social work teams had said the service goes above and beyond when providing care to people.