

GA Professional Healthcare Limited

GA Professionals Healthcare LTD

Inspection report

23 Whitestone Way
Croydon
Surrey
CR0 4WF

Tel: 03333110172

Date of inspection visit:
26 July 2022

Date of publication:
09 September 2022

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

GA Professionals Homecare Ltd is a domiciliary care service providing personal care to people in their own homes. At the time of the inspection two people were receiving personal care who were elderly and required support to remain as independent as possible. 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.

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

People received the right support in relation to risks, such as those relating to age and frailty. There were enough staff to support people safely. The provider checked staff were suitable to work with people through recruitment checks. Staff received training in infection control practices, including the safe use of personal protective equipment (PPE) to reduce the risk of COVID-19 transmission. People received the right support in relation to their medicines.

The registered manager understood their responsibility to notify CQC of significant events, such as allegations of abuse, as required by law, although there had not been any since the service registered with us. The registered manager and their management and staff team understood their role and responsibilities. The registered manager engaged and consulted well with people using the service, relatives and staff. Staff felt well supported by the registered manager. 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.

Staff received the training and support they needed to meet people's needs. People were supported to maintain their health and to maintain contact with professionals involved in their care. People received food and drink of their choice.

People liked the staff who supported them and developed good relationships with them. People received consistency of care from a small number of staff who knew them well. People were supported to improve their independent living skills as far as possible and staff treated people with dignity and respect. People were involved in their care and their care plans were based on their individual needs and preferences. People were encouraged to raise any concerns or complaints.

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

Rating This was the first inspection since the provider registered with us on 30 August 2018.

Why we inspected

This inspection was prompted because of the length of time since they registered with us on 30 August 2018. The service had been dormant for much of the time until this inspection which meant we were unable to

inspect.

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 ●

GA Professionals Healthcare LTD

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 Care Act 2008.

Inspection team

This inspection was completed 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 and specialist housing. The service had a manager registered with the Care Quality Commission. 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.

Notice of inspection

This inspection was announced. We gave the service 48 hours' notice of the inspection. This was because we needed to be sure the registered manager or a senior person would be available to support the inspection. We also needed to obtain the consent from people using the service to be contacted by us to obtain feedback on their experience of using the service.

The inspection activity started on 26 July 2022 by visiting the provider's office to meet with a director and the care-coordinators. We then made phone calls to people using the service and staff, and inspection activity ended on 30 August 2022.

What we did before the inspection

We reviewed the information we had received about the service since they registered with us, including any statutory notifications received. The provider completed a provider information return. This is information providers are required to send us with key information about their service, what they do well and improvements they plan to make. We used all of this information to plan our inspection

During the inspection

We spoke with a director and the two care coordinators. The registered manager was unavailable due to a health condition. We reviewed a range of records including care and staff records and records relating to the management of the service. We spoke with the relatives of two people using the service about their experiences of the care provided. We continued to seek clarification from the provider to validate evidence found.

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 felt safe with staff. The provider encouraged people to raise concerns with them so they could resolve them.
- Systems were in place to protect people from the risk of abuse including staff training to understand abuse and their responsibilities in relation to it.
- Although there had been no allegations of abuse, the registered manager understood their responsibilities to report to the local authority safeguarding team, follow their guidance and to notify CQC.

Staffing and recruitment

- There were enough staff to support people safely and the registered manager was recruiting more staff so they could provide care to more people. People told us staff were usually on time.
- The provider carried out recruitment checks including those relating to criminal records, references, fitness to work, identification and an interview to assess their suitability to work with vulnerable people.

Using medicines safely

- People's medicines were managed safely. People and relatives told us this and our findings confirmed it.
- The provider assessed risks relating to medicines management and put guidance in place for staff to reduce the risks.
- Only staff who had received suitable training, with competency checks, administered medicines to people.
- The provider monitored medicines management including checking medicines records, observing staff administer and asking people for their feedback.

Preventing and controlling infection

- Staff received training in infection control and the safe use of personal protective equipment (PPE) to reduce the risk of infections including COVID-19. Relatives told us they were happy with staff infection control processes.
- Staff also received training in food hygiene and people did not raise any concerns about the way staff handled their food.
- The registered manager carried out regular checks of infection control practices, including observations, to ensure staff followed current guidance.
- The provider assessed risks related to COVID-19 for people using the service and staff and took action to reduce risks where possible.

Assessing risk, safety monitoring and management; learning lessons when things go wrong

- The provider had good systems to identify and assess risks to people, such as those relating to mental or physical health conditions, the home environment and infection control. Guidance was in place for staff to follow to reduce the risks.
- Staff understood how to respond to accidents and incidents, including how to respond in case a person fell, and had received training on this. The provider reviewed accidents and incidents to reduce the risk of reoccurrence.

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.

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

- People's mental and physical healthcare and emotional support needs were understood and met by staff. Staff had access to key information about people in their care plans as the provider recorded people's support needs clearly.
- Staff supported people to see the healthcare professionals they needed to maintain their health, when this was an agreed part of their care.
- The provider recorded people's food preferences and dietary needs in their care plans and staff prepared meals in line with these when it was an agreed part of their care.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law

- People's needs were assessed by the provider before their care began. A senior person met with people and their relatives and reviewed any professional reports to check they could meet their needs.
- The provider continued to assess whether people's care met their needs through regularly reviewing their care plans and consulting with people and others involved in their care, such as their relatives and professionals including district nurses and social workers.

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 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 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 registered manager understood their responsibilities in relation to the Act. At the time of our inspection no one required MCA assessments relating to their care. One person's family member had legal authorisation to make some decisions in the best interests of a person and the provider worked closely with them to plan their care.

- Staff understood their responsibilities in relation to the MCA and they received training in this.

Staff support: induction, training, skills and experience

- Staff received regular training in relation to their role such as dementia, health and safety, moving and handling, infection control and food hygiene. Relatives were positive about staff knowledge and skills and felt they had the right training.
- Staff were supported to complete the care certificate and diplomas in care, nationally recognised qualifications to ensure the required skills and knowledge. The provider told us specialist training was available to staff if required.
- Staff received regular supervision and annual appraisal with spot checks to check they carried out their responsibilities well. Staff felt well supported by the provider.

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.

Respecting and promoting people's privacy, dignity and independence

- People were encouraged to be involved in their care as much as they wanted to, to help maintain their independent living skills. A relative told us, "Staff encouraged [my family member] to do as much for themselves as possible".
- People's privacy and dignity was respected by staff and staff understood how to maintain people's confidentiality. Staff received training to understand their responsibilities in relation to this.

Ensuring people are well treated and supported; respecting equality and diversity

- People were positive about the staff who supported them. A relative told us, "All the staff are very kind, they understand [my family member] very well".
- People received consistency of care from staff who knew them well each day. This meant staff knew people well and developed good relationships with them.
- Relatives told us staff were not rushed and timekeeping was good. Staff had time to engage with people and provide a meaningful connection.
- Staff received training in equality and diversity and people's religious, cultural and social needs were recorded in their care plans and understood by staff. The provider told us they could match people with carers who understood their preferred language and/ or could cook food culturally appropriate to them in some cases.

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

- Staff cared for people according to their personal preferences, such as how they liked to receive personal care, their daily routines and food and drink.
- The provider contacted people or their relatives regularly to check their care met their needs or whether any changes were needed.

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 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's care plan were based on their individual needs and preferences gained through discussions with people and their relatives. Care plans were kept up to date so they remained reliable for staff to follow.
- People's care plans were personalised, setting out what they wanted to achieve through their care, those who were important to them and how they preferred to receive their care.
- Staff were available to support people to attend activities when this was part of their agreed care.

Improving care quality in response to complaints or concerns

- People were given a copy of the provider's complaints policy and were encouraged to do so.
- Relatives had confidence the provider would investigate and respond appropriately if they raised a concern. A relative told us, "I have a lot of faith in [the registered manager] if I were to raise a complaint".
- Records showed the provider responded to issues appropriately, keeping people informed of their investigation and the outcome.

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 provider met the AIS and the provider confirmed key information could be provided to people in alternative formats if necessary.
- The provider recorded people's communication needs in their care plans and how best to communicate with them so staff were aware of these.

End of life care and support

- At the time of our inspection the provider told us no one was receiving end of life care. However, the registered manager told us they would work closely with the person, their relatives, the local hospice and others involved in their care if they needed to provide end of life care. Training was available to staff on how to provide good end of life care.

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.

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

- The registered manager was experienced in managing care services including this homecare agency. Our discussions and findings showed they understood their role and responsibilities overall. Relatives were positive about the leadership of the service.
- The provider had a system of audits to check people received a good standard of care. These included checks of all care records, staff supervision and training.

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; working in partnership with others; 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

- Relatives told us the provider communicated well with them, through phone calls and visits, as did staff.
- The registered manager understood the duty of candour, which is their legal responsibility to be open and honest with people when something goes wrong. Relatives told us the registered manager was open and transparent.
- The registered manager understood their responsibility to send us notifications in relation to significant events that had occurred in the service such as any allegation of abuse, although none had been required.
- The provider communicated with external health and social care professionals such as social workers, district nurses, GPs and occupational therapists to ensure people received the care they needed.