

Alina Homecare Ltd

Alina Homecare Poole

Inspection report

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Date of inspection visit:
31 March 2023

Date of publication:
19 April 2023

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

Alina Homecare Poole is a domiciliary care service providing the regulated activity of personal care to people living in their own houses and flats. At the time of our inspection there were 33 people using the service.

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.

We expect health and social care providers to guarantee people with a learning disability and autistic people respect, equality, dignity, choices and independence and good access to local communities that most people take for granted. 'Right support, right care, right culture' is the guidance CQC follows to make assessments and judgements about services supporting people with a learning disability and autistic people and providers must have regard to it.

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 an autistic person. 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. We took this into account within this summary.

People, their relatives and staff told us Alina Homecare Poole worked to provide a safe service. People were complimentary and told us the staff were kind and caring, whilst attending to their needs. Staff enjoyed working at the service and were safely recruited, considering their skills, values, and knowledge. There were enough staff working at the service to cover the visits planned.

People had their risks identified, assessed and clear instructions for staff meant they were working in safe ways. Staff were trained in safeguarding adults and knew how to recognise concerns and who to report them to. Staff told us they were confident the management team would take concerns seriously and deal with them appropriately. People were supported with their medicines by trained staff who had their competency assessed. Medicines were managed closely with immediate alerts if a medicine was late or missed.

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. Accidents and incidents were recorded, analysed and the service learnt lessons from events. Outcomes were shared within the service and at the provider's other locations.

Staff worked in safe ways, they had good supplies of the necessary personal protective equipment (PPE) and the service followed good practice and government guidance. Quality assurance systems were robust and

there was good oversight at provider level. Alina Homecare Poole actively sought feedback on the service it provided and used the feedback to make improvements. Staff felt proud to work at the service and were complimentary about their colleagues.

People, their relatives and staff told us Alina Homecare Poole was well led. We received compliments about the registered manager and management team. The registered manager understood their role and statutory responsibilities. The service worked well with external health and social care professionals.

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

Rating at last inspection

The last rating for this service was good (published 14 June 2018).

Why we inspected

We had not inspected and visited this service since 2018. As a result, we undertook a focused inspection to review the key questions of safe and well-led only.

For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating. The overall rating for the service has remained good based on the findings of this inspection.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Alina Homecare Poole on our website at www.cqc.org.uk

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 well-led?

The service was well-led.

Details are in our well-led findings below.

Good ●

Alina Homecare Poole

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

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 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 a registered manager in post.

Notice of inspection

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 31 March 2023 and ended on 3 April 2023. We visited the location's office on 31 March 2023.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. We sought feedback

from the local authority service improvement and safeguarding teams. The provider completed 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 5 people who used the service and 5 relatives about their experience of the care provided. We spoke with and received feedback from 11 members of staff including the registered manager, operations manager, quality manager and care workers.

We reviewed a range of records. This included 3 people's care and medication records. We looked at 3 staff files in relation to recruitment and staff supervision. 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.

At our last inspection we rated this key question good. At this inspection the rating has remained as good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People and their relatives told us the service provided by Alina Homecare Poole was safe. Some of their comments were: "I feel my loved one [name] is safe because they [service] are so approachable", "I have peace of mind", "I feel the service is safe as the staff that come are so caring about everything", "I am happy with the service", "I feel safe, they [staff] do everything for me."
- Staff told us they knew how to recognise the signs that someone may be at risk of harm or abuse. They knew who to report their concerns to both inside the service and externally.
- There were clear communication channels for raising concerns within the service. Staff were reminded of the importance of speaking up within team meetings and training updates. A member of staff told us, "I can report this to my manager, if not my manager, then my operations manager and then higher up the company, if none of them it would be CQC."
- Staff had received training in safeguarding and were confident any concerns they raised would be taken seriously and acted upon by the registered manager and office staff. A member of staff said, "I know it will be resolved as my managers are always ensuring things are sorted right away."
- Safeguarding concerns were reviewed monthly; records showed all necessary actions and referrals had been made.

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

- People had risk assessments in place for all their care and support. Communication lines were good, and staff reported any concerns and changes to the service. A person told us, "Staff are very aware of my risks, and they even help me with manage my health conditions."
- Assessments were detailed, clearly identifying the risk with clear instructions for staff of how to work to reduce the risk. Staff told us they understood the risks people faced and people confirmed this.
- Environmental risks had been assessed, this included how the person should be supported to leave their home in the event of a fire or other emergency.
- Accidents and incidents were recorded, and these had oversight of the registered manager who checked that all necessary actions had been completed. Staff reported incidents and accidents when they happened. The provider had systems in place to ensure accidents, incidents and events were reviewed and discussed between their various levels of management.
- Learning was shared with staff through meetings, supervisions, messaging and by updates to people's care and support plans.

Staffing and recruitment

- There was enough staff to cover the visits planned, people only started to use the service when staffing

was available to them.

- Recruitment of staff was ongoing. The service had faced the same challenges as other providers due to the national shortage of care workers. Formal interviews were in place and included values-based questions and a thorough induction.
- Staff files contained appropriate checks, such as references and a Disclosure and Barring Service (DBS) check. DBS checks provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.
- Additional safety measures were in place as staff logged into the electronic system when they arrived and left a person's home. An alert was sent to the office staff if the visit was late. This meant staff could check in to see if there was a problem and was a safeguard against missed visits.

Using medicines safely

- People received their medicines as prescribed. There were safe procedures in place including an electronic system for medicines management. A relative told us, "They [staff] always make sure there is the correct time gaps between doses, this makes sure medicines are taken correctly."
- Medicine administration records (MAR) were completed correctly and checked. Staff were able to update and make changes to people's MAR immediately following instruction from the GP or pharmacist. This meant people were receiving the correct treatment.
- Staff responsible for giving medicines had been trained and had their competency assessed. Regular checks ensured safe practice was carried out.
- Where people were prescribed medicines, they only needed to take occasionally, guidance was in place for staff to follow to ensure those medicines were administered in a consistent way.

Preventing and controlling infection

- Safe working procedures in place meant people were protected from avoidable infections.
- Staff had received training in hand hygiene procedures, and correct PPE, this was monitored during routine spot checks.
- There were enough supplies of PPE and people confirmed staff wore this when working to keep them safe.
- Adjustments had been made in response to the COVID-19 pandemic and policies changed in response to government guidance where necessary.

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 good. At this inspection the rating has remained as 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

- Quality assurance processes were in place and working robustly and enabled Alina Homecare Poole to monitor the standard of the care provided. Audits and checks were in place within the service and at provider level. This meant there was a multi-layered approach to governance.
- A range of audits were carried out and included medicines, logbook entries, care plans and risk assessments. Action plans were clear and had the person responsible for the action and timescales. All actions had the oversight of the registered manager.
- Staff meetings were held via videocall, the preference of the staff team. This meant the registered manager could reach more of the team but being flexible around their outside responsibilities. In addition, there were regular updates by messaging service and email.
- There were various processes in place to ensure continuous learning within the service, from day-to-day events and good practice learning between the providers locations.

Promoting a positive culture that is person-centred, open, inclusive, and empowering, which achieves good outcomes for people

- Staff were actively engaged in decisions about the service, their views were sought during supervisions and surveys. Staff felt involved and worked together to provide a good service, they were complimentary about their colleagues. A member of staff told us, "We work together as a team to ensure our service users receive the time and care that they deserve."
- Staff told us they felt appreciated. There were various recognition and appreciation initiatives within the service such as, gift vouchers and thank you cards.
- Staff were proud to work at Alina Homecare Poole, their comments included: "I feel proud working for Alina because they invest in my training, care about my welfare and above all, my conditions of service are well catered for", "I am very proud to be a part of Alina Homecare because it is full of wonderful people and everyone is so caring, kind as support and care is what our clients need", "All of the carers we have are actually the best at what they do, we have all worked hard as a team to get a good name for ourselves, we all deliver to very high standards and all of us actually care about our clients with great passion", "I feel supported and love my job."
- People, their relatives and staff were complimentary about the leadership of Alina Homecare Poole. Some of their comments included: "The registered manager [name] is a lovely person, approachable, supportive, kind and caring", "Management is brilliant, and they are all helpful, kind, caring and supportive", "The registered manager [name] is a great manager, they are always here to support me with anything I am

unsure on. They run the branch very well", "The management for Alina I think is very positive", "The registered manager [name] is very supportive and always tries to help. I think they are very good in their role.

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 the requirements of the duty of candour, that is, their duty to be honest, open and apologise for any accident or incident that had caused or placed a person at risk of harm.
- The registered manager understood CQC requirements, in particular, to notify us, and where appropriate the local safeguarding team, of incidents including potential safeguarding issues, disruption to the service and serious injury. This is a legal requirement.

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

- People were offered the opportunity to be involved in the service and were asked by staff if there was anything different, they wanted or any changes necessary to make life better for them. One person said, "Staff always ask me if I need anything else done before they leave."
- Support for staff was important to Alina Homecare Poole and appreciated. There were various schemes of support available at no cost to staff such as support with mental wellbeing, rewards and discounts.
- The service continued to make links within the community and supporting people to come together for activities such as Christmas celebrations. Birthdays were recognised for people using the service with each one receiving a card on their special day.
- The service had recently sent out satisfaction surveys for people and their relatives. The most recent survey had been returned and had positive results. The provider was keen to capture people's views. The registered manager told us they sent out a newsletter to people with updates and items of interest.
- The service worked well with health and social care professionals. Records showed input was sought for people regularly.