

Samzi Ltd

# Samzi Ltd (T/A Visiting Angels)

## 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

Samzi Ltd (T/A Visiting Angels) is a domiciliary care agency registered to provide personal care to people in their own homes. The domiciliary care agency provides personal care and assistance with other household tasks including cleaning and shopping. At the time of inspection, a service was provided to four people, one of whom received assistance with personal care. The Care Quality Commission (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 comprehensive assessment of their needs and preferences. Care plans developed from these assessments provided the information and guidance staff required to ensure people's individual needs were met in a personalised way.

The person received consistent care from regular care staff who had a good understanding of their care needs and preferences. Care staff were punctual and stayed the agreed amount of time.

The person using the service was unable to speak with us due to their needs. The person's relative spoke in a positive way about the service and the care provided to their family member.

Systems were in place to protect people from abuse. These included safeguarding policies and appropriate training for staff. Personalised risk assessments helped keep the person safe and supported their independence. The person's relative was confident that the person was safe when in the presence of care staff.

Suitable infection control practices helped to prevent and control the spread of infections including COVID-19.

Recruitment and selection policies and procedures were very robust. This helped to ensure that only suitable staff were employed to provide care and support to people. Staff were provided with the training and support they needed to carry out their roles and responsibilities in providing good quality effective care.

Policies and processes were in place to support safe management and administration of medicines.

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.

Effective quality checks monitored the care and support provided to people and improvements to the service were made when deficiencies were found.

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 05 June 2020 and this is the first inspection.

#### Why we inspected

This inspection was prompted by a review of the information we held about this service.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Samzi Ltd (T/A Visiting Angels) on our website at [www.cqc.org.uk](http://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 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 ●

# Samzi Ltd (T/A Visiting Angels)

## 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 team consisted of 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

We gave the service two working days' 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 28 June 2022 and ended on 13 July 2022. We visited the location's office on 28 June 2022

### What we did before the inspection

We reviewed the information we had received about the service since it was registered with the CQC. 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

During the visit to the office we met and spoke with the company director/nominated individual of Samzi Ltd (T/A Visiting Angels). The nominated individual is responsible for supervising the management of the service on behalf of the provider. We reviewed a range of records which related to the person's individual care and the running of the service. These records included one person's care records, two staff personnel records, medicine administration records and policies and procedures relating to the management and quality monitoring of the service.

As the person using the service was unable to speak with us, we obtained feedback from this person's relative. We also spoke with two care staff.

# 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

- Policies and systems were in place to protect people from the risk of abuse and keep them safe.
- Staff had received training about safeguarding people and were knowledgeable about the safeguarding policies. They demonstrated a good understanding of how to recognise potential signs of abuse and knew they needed to report all allegations and suspicions of abuse without delay. Safeguarding procedures had been discussed with staff during a team and one to one supervision meetings.
- The registered manager demonstrated a good understanding of their responsibilities in protecting people from the risk of abuse. They knew to notify us and report to the local safeguarding team when abuse was suspected.

Assessing risk, safety monitoring and management

- The provider had policies and systems in place to minimise the risk of people being harmed and to keep people and staff safe.
- Potential risks were considered as part of the assessment process. People and/or their representatives were involved in all decisions to minimise potential risk. Risks associated with the person's health and care needs had been identified, assessed and documented within their care plan. These included risks associated with their personal safety, mobility and home environment. Guidance was in place for staff to follow to manage identified risks, reduce the risk of the person being harmed and to support their independence.
- Care plans and risk assessments were frequently reviewed and promptly updated when changes in people's needs were observed. Changes were communicated to staff to ensure they had up to date information about managing risks and keeping people safe. Staff we spoke with were familiar with the person's risk assessments.

Staffing and recruitment

- The provider had very robust systems in place to help ensure that only suitable staff were recruited to provide people with care and support. These included obtaining four references, checking gaps in employment history, psychometric tests (identify prospective staff skills, knowledge and personality) and carrying out Disclosure and Barring Service (DBS) checks. DBS checks provide information including details about convictions and cautions held on the Police National Computer. This information helps employers make safer recruitment decisions.
- People receiving a service from the agency were fully involved in choosing the care staff they wanted support from. Care staff told us they had been interviewed by people using the service before they provided them with regular care and support. The provider made sure there were enough staff to meet the person's needs and preferences. They monitored staff's time keeping closely. There had been no missed calls.

- There were sufficient staff to provide the person with the care and support they needed. The registered manager told us that they provided 'hands on care' when required and was in the process of recruiting more care staff.

#### Using medicines safely

- People's medicines were managed and administered safely. The provider's medicines policy detailed the support they were able to give people with their medicines and included procedures staff were required to follow in line with best practice guidance.
- Staff had received medicines training and their competency to administer medicines safely had been assessed. Observations of care staff administering medicines were regularly carried out to ensure they remained competent to manage people's medicines safely. Care staff spoke highly about the medicines training, support and guidance they had received.
- The person had a detailed personalised medicines' care plan and risk assessment. These included details about their medicines, any side effects and the support they needed with the administration of their medicines. Step by step personalised guidance for staff to follow helped to ensure the person received their medicines as safely.
- Staff recorded the administration of people's medicines on medicines administration records (MAR). This helped to ensure there was an accurate record of when medicines had been administered. These records were monitored closely by the registered manager to ensure the person received their medicines as prescribed.

#### Preventing and controlling infection

- There were appropriate systems in place to prevent and control infection.
- Staff had received training in infection prevention and control (IPC) and COVID-19. This helped them to follow good hygiene practices when providing people with care and support. Care staff IPC practice was monitored closely during observational checks carried out by the registered manager. A person's relative spoke positively about the way staff ensured the home environment was kept clean.
- The provider ensured that staff were supplied with the personal protective equipment (PPE) they needed to minimise the risk of infections spreading.

#### Learning lessons when things go wrong

- There were policies and procedures in place that helped ensure staff were effective and responsive when things go wrong. The registered manager spoke about the importance of staff learning lessons from incidents and complaints to minimise the risk of them happening again and to make improvements to the service.
- The registered manager informed us that there had not been any incidents or accidents. However, the service had systems to report, record and monitor incidents and accidents. The registered manager knew they needed to be investigated and reviewed looking for causes and trends to help reduce the risk of similar incidents happening again.

# 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's needs and preferences were comprehensively assessed before their care visits commenced. The comprehensive initial assessment involved the registered manager meeting each person and gathering information from them (if able to provide it) and where applicable others involved in their care. This assessment helped the provider to determine if they had the right staff with the appropriate skills and abilities to support the person and meet their individual care needs and choices.
- Information collated included the people's specific health and care needs, how they wished to be supported and their protected characteristics under the Equality Act 2010. The person's care plans included details of their needs, interests and the support they required to make choices. Care plans showed the person's religious, cultural, dietary, sensory, and other specific needs had been considered and supported by the service.
- Detailed and personalised care plans and risk assessments were developed from the initial assessment and when applicable the commissioning local authority's support plan. These were reviewed and updated as staff got to know the person and when their needs and preferences changed. The person's care plan included personalised guidance for staff to follow to ensure the person received the care they needed in the way they wanted.

Staff support: induction, training, skills and experience

- New staff received a comprehensive robust induction. This included learning about the care agency and shadowing more experienced staff as they assisted the person with personal care. Staff also took an exam following completion of an induction learning programme of modules that related to their job roles, skills, behaviours and relevant areas and topics to do with social care.
- Staff spoke very highly of their induction and told us they had found it to be very helpful in preparing them for carrying out their role and responsibilities. They told us that the induction process had been challenging at times but had prepared them fully for providing good quality care. They told us they had received the guidance and support they needed in completing their induction programme from the registered manager.
- Staff received the training they needed to carry out their job roles. Training was supported by new staff shadowing established care workers. Observations were undertaken to check care staff were using their care skills effectively and to ensure any concerns were addressed quickly.
- Staff also received coaching and mentoring sessions, which provided them with support and guidance, and gave them the opportunity to discuss any issues to do with their work with the registered manager.
- Regular supervision meetings provided opportunities for both management and care staff to address concerns, provide staff with support and reinforce learning and development.

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

- People were supported to eat and drink enough to ensure their nutritional needs and preferences were met.
- People's specific dietary requirements and preferences were identified in their care plans, so they were known to care staff. These included details of people's medical, cultural and/or religious dietary needs and preferences.
- Staff received training about nutrition and hydration. They were knowledgeable about the importance of people eating and drinking enough and knew they needed to report any changes in people's appetite and dietary preferences to the registered manager. One care staff told us that before leaving they always left a "glass of water and juice" for the person.
- Visit records included details about the meals the person ate. These records were monitored closely by management to help ensure the persons dietary needs and preferences were always met.

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

- Systems were in place to support people to access health care professionals and services where required. The registered manager provided us with examples of where she had communicated with a person's GP and pharmacist, about aspects of their care needs.
- Visit records of people's health, care and well-being were in place. Staff worked with the person's relative to ensure the person received effective care and support.
- The registered manager was aware about the importance of supporting people to live healthier lives. Staff supported people to go for walks, chair exercises and take part in activities of their choice.

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 was currently not supporting anyone who was subject to a Court of Protection application in relation to the deprivation of their liberty.
- People were supported to make choices and decisions about their lives. Care records identified whether the person had the capacity to make particular decisions, and detailed the support they needed with day to day needs, such as with their medicines, personal care and meals.
- Staff completed training to help them understand and abide by the principles of the MCA. They understood the importance of gaining people's consent before providing care and support and promoting people's rights and choices. They knew that if a person did not have the capacity to make a decision it could be made in the person's best interests by the person's Lasting Power of Attorney (the legal authority to appoint an 'attorney' to make decisions on person's behalf if they lose the mental capacity to do so), relatives, healthcare professionals and others involved in the person's care.

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

- There were systems in place to make sure people were well treated and respected. These included ensuring that staff received appropriate training and supervision. The provider ensured people's experience of care was monitored closely through unannounced observational checks of staff providing care and by obtaining feedback from people.
- Staff received training about respecting equality and diversity. They had a good understanding of the importance of valuing people's differences, treating them as individuals with respect and dignity.
- The person's care plan was personalised and included information about their equality and diversity needs and preferences. Guidance helped ensure that staff understood and respected those needs.
- Care plans included detailed information about people's lives, family and interests. This helped staff to have a better understanding of the person and supported their engagement with people and in the development of trusting, positive relationships. Care plans were regularly reviewed with people and their relatives. This helped to ensure that people's needs and preferences were always understood and met.
- People received consistency of care. The provider arranged for regular staff to carry out people's care visits at the times they preferred and ensured people and relatives were told about any staff changes and were satisfied with the arrangements.

Respecting and promoting people's privacy, dignity and independence

- During spot checks of care staff assisting people with personal care and other tasks the registered manager checked that staff were treating people with respect and supporting their privacy and independence.
- Care staff were clear about the importance of respecting people's dignity, privacy and independence. They provided examples of how they supported people's privacy and independence when assisting them with personal care and other activities. A relative told us that a person's mobility and well-being had significantly improved since receiving care from Samzi Ltd (T/A Visiting Angels) and another support service.
- The provider had policies and procedures in place to help ensure that people's privacy and confidentiality was respected at all times. General data protection regulations were observed and confidential information was protected. Staff knew not to share any information about people with those not involved in their care.

# 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

- People received personalised care that met their needs and preferences. Regular reviews of the person's care helped to ensure that staff were aware of, and responsive to any changes in their needs.
- The person's initial assessment and care plans showed that the provider had sought the information they needed to make sure that the person received personalised care and support.
- The providers' policies and systems ensured that the person was at the centre of their care, fully involved in the planning and review of their personalised care. A person's relative told us that communication with the service was good. They spoke of being listened to and confirmed that the person was receiving personalised care and support.
- People's care plans included details about the choices the person was able to make and about the support they needed from their relative and staff to make others. Staff provided us with examples of how they supported and encouraged people to make choices. This included supporting people to make choices about what to wear and eat.
- Care staff told us they had got to know about the care the person needed by shadowing the registered manager when she assisted the person with personal care, reading the care and risk assessment records, speaking with the person, the person's relative and by observation. A relative spoke positively about the registered manager. They told us that they had 'shadowed' them when they assisted the person with their care and other activities, so they were familiar with the person's care needs and preferences before their care commenced.

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 person's communication needs including any hearing or vision needs were detailed in their care plan. Staff were knowledgeable about the ways the person communicated and engaged with them.
- The registered manager was aware of the importance of information being as accessible as possible to people and told us they would make sure information was always provided in a way each person understood, such as in large print and/or pictures. The person using the service had information about their medicines in pictures to help them understand it.

#### Improving care quality in response to complaints or concerns

- The provider had a complaints policy and procedure. This was provided to each person using the service. A relative told us that they knew how to make a complaint and would not hesitate to bring any concerns to the attention of the registered manager.
- At the time of this inspection there had not been any complaints. The registered manager was aware of the part complaints had in improving the quality of the care provided. They told us they would ensure that complaints would be addressed effectively and regularly reviewed looking for any patterns and trends, so action could be taken to minimise similar complaints being made again. Any lessons learnt from complaints would be shared with staff.
- Staff knew any complaints and concerns about the service that were brought to their attention by people, people's relatives or others, needed to be recorded and promptly reported to the registered manager.

#### End of life care and support

- At the time of the inspection there was no one receiving end of life care. The registered manager told us that she had experience of providing end of life care and they would ensure staff received the training and support they needed so people had personalised care at the end of their life.

# 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

- The service had a positive culture that was person centred, empowering and inclusive which helped to ensure good outcomes for people were achieved.
- The registered manager spoke passionately about ensuring people took the lead in their care so they received personalised care that not only met their needs and preferences but also enhanced their well-being. They told us and photographs showed that a range of social events and activities had been arranged for people using the service.
- A person's relative spoke in a positive way about the engagement and communication they had with the registered manager.
- Staff spoke enthusiastically about their work. They told us they enjoyed their jobs providing people with personalised care and support. They spoke of good teamwork and of the significant support and guidance they received from the registered manager.

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 duty of candour expectations and knew the importance of being open and honest when something goes wrong.
- The registered manager knew what type of events they needed to notify us and other organisations about.

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

- The registered manager and care staff were clear about their roles and responsibilities and understood the importance of monitoring, learning and improving the quality of the service provided to people. The registered manager had created a comprehensive business plan which included actions to develop and improve the service. These included introducing more systems including an electronic monitoring system for staff punctuality and attendance.
- The provider was a franchisee (small-business owner who operates a franchise). They received policies and procedures and continuous support, information and guidance from the franchisor. The franchisor organised regular events and training for management staff. The registered manager spoke of engaging with other franchisee registered managers, "We support each other and share best practice."
- Observational checks by the registered manager monitored staff whilst they were carrying out care visits. These helped to monitor staff competence in key areas, such as providing personal care, using personal

protective equipment safely, completing 'daily' records and medicines administration. Suitable systems ensured that when improvements were found to be needed these were promptly addressed.

- A range of checks were carried out. These included checks of care plans, medicines administration records, care records, staff training, staff personnel files and other areas of the service. This monitoring helped ensure people received good quality care as improvements were made when found to be needed.
- Staff were informed of any changes to the service and the person's needs. They had received regular up to date guidance about COVID-19 during the pandemic, and continue to do so.
- Policies and procedures were reviewed and staff were updated when guidance changed. Staff indicated they had read the policies by signing them.

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

- The provider had systems in place that encouraged and supported staff, people and those important to them to be fully involved in people's care. People's equality protected characteristics, including, age, disability, religion or belief and race were understood and respected.
- The registered manager gained feedback about the service during telephone calls to people's relatives and during regular visits. There were a number of compliments about people's experience of the service. A relative spoke highly about the Samzi Ltd (T/A Visiting Angels), and told us they had recommended the agency to others.
- The registered manager spoke about the importance of effective communication with those involved in the people's care. Records showed that the registered manager had been in contact with health care professionals about an aspect of one person's care. The registered manager told us that she attended regular provider forums arranged by the host local authority, where relevant information, best practice and guidance were shared.
- The provider recognised the importance to the service and people's care of supporting and valuing their staff. They ensured staff well-being was supported and promoted in a number of ways including giving them awards and holidays in recognition of excellent work, and graduation ceremonies following completion of their probationary period. We were provided with several examples where staff had 'gone the extra mile', these included arranging birthday and other celebrations and providing personalised activities for an elderly relative of a person receiving support from the service. Staff spoke very highly of their experience of working with the care agency.