

Audley Care Ltd

Audley Care Ltd - Audley Care St Elphins Park

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: Audley Care Ltd - Audley Care St Elphins Park are based at St Elphin's Retirement Village. They provide personal care and support to people living in their own homes at St Elphin's Retirement Village and in the local community.

Not everyone using the service receives the regulated activity of personal care. CQC only inspects the personal care service provided to people, that is help with tasks related to personal hygiene and eating. Where personal care is provided to people we also take account of any wider social care provided. At the time of our inspection there were 29 people receiving personal care from the provider.

People's experience of using this service:

People were safeguarded from the risk of abuse. Risks associated with people's care and support had been identified and managed appropriately. The provider had a safe recruitment system in place. Staff told us they had enough time to support people. Medicines were managed in a safe way.

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 training and support to carry out their role effectively. People received appropriate healthcare and were supported to maintain a balanced diet. People's needs and choices were identified and respected.

We spoke with people who used the service who were very complimentary about the care and support they received. People confirmed that their privacy and dignity was maintained.

Care records were person-centred and reflected people's needs and preferences. People were involved in their plans of care. The provider had a complaints procedure which people were aware of. People told us they felt at ease to raise concerns and felt they would be appropriately addressed.

Staff we spoke with knew their role and responsibilities and felt supported by the registered manager. People had opportunities to voice their opinions about the service. The provider had systems in place to ensure the service maintained the quality they expected.

Rating at last inspection: Good (report published 19 October 2016).

Why we inspected: This was a planned comprehensive inspection based on the rating at the last inspection.

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

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 remained good.

Details are in our Safe findings below.

Is the service effective?

Good ●

The service remained good.

Details are in our Effective findings below.

Is the service caring?

Good ●

The service remained good.

Details are in our Caring findings below.

Is the service responsive?

Good ●

The service remained good.

Details are in our Responsive findings below.

Is the service well-led?

Good ●

The service remained good.

Details are in our Well-led findings below.

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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. This inspection was planned to check whether the provider was meeting the legal requirements and regulations associated with the Act, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

Inspection team:

The inspection was carried out by two inspectors 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:

Audley Care St Elphins Park is a domiciliary care service providing care for people who need care at home. The Care Quality Commission (CQC) regulates the care provided by the provider and this is what we looked at during this inspection.

The service had a manager registered with the CQC. 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:

We gave the service 48 hours' notice of the inspection visit because it is small and the manager is often out of the office supporting staff or providing care. We needed to be sure that they would be available.

What we did:

Prior to the inspection visit we gathered information from a number of sources. We also looked at the

information received about the service from notifications sent to the CQC by the registered manager. We asked the provider to complete a provider information return. This is a form that asks the provider to give some key information about the service, what the service does well and improvements they plan to make. We also spoke with other professionals supporting people at the service, to gain further information about the service.

We spoke with seven people who used the service and some of their relatives. We spent time observing staff interacting with people. We spoke with eleven staff including care workers, the registered manager, the regional manager, the quality care supervisor and the deputy manager. We looked at documentation relating to three people who used the service, two staff files and information relating to the management of the service.

Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm.

Good: People were safe and protected from avoidable harm. Legal requirements were met.

Systems and processes to safeguard people from the risk of abuse

- People were protected from the risk of abuse. Staff received training in safeguarding and knew what actions to take if abuse was suspected. When asked to tell us about the types and signs of abuse, and the process for reporting concerns, they did so confidently.
- People we spoke with felt safe in the presence of staff. One person said, "I feel very safe and they [staff] lock the door as I have a key safe." Another person said, "I very definitely feel safe with them [staff] and I know that if I had any worries then I could phone the office at any time. If they [staff] haven't come, which happened one time then I just called the office, and someone was here within 15 minutes. The staff know me, and I know them which helps me to feel safe."

Assessing risk, safety monitoring and management

- Risks associated with people's care had been identified and managed in a way which kept them safe.
- We looked at care records and found they contained detailed risk assessments which highlighted what actions to take to minimise the risk.
- Staff spoke confidently about risks associated with people's care and how these were managed.

Staffing and recruitment

- The provider had a recruitment policy which assisted them in the safe recruitment of staff. This included obtaining pre-employment checks prior to staff commencing employment. These included references from previous employers, and a satisfactory Disclosure and Barring Service (DBS) check. DBS checks help employers make safer recruitment decisions and prevent unsuitable people from working with vulnerable people. We looked at staff recruitment files and found they contained relevant checks.
- We spoke with staff and people who used the service and they felt there were enough staff available to support people in a meaningful way. One person said, "Staff always turn up for the calls though they can be late on occasion, it doesn't cause any problems for us." Another person said, "The staff are mostly on time except when it is unavoidable."

Using medicines safely

- People's medicines were managed in a safe way and administered as prescribed.
- The service operated an electronic system where medicines were signed as administered on an electronic medicine administration record (EMAR). We looked at a sample of these records and found them to accurately reflect medicines administered.
- Staff we spoke with confirmed they received training in medicine management. Staff told us they were trained to handle medicines safely and had completed competency assessments to ensure their knowledge remained up to date.

Preventing and controlling infection

- People we spoke with confirmed that staff wore appropriate personal protective equipment (PPE), such as gloves. One person said, "They [staff] are brilliant. We don't know what we would do without them. They always wear their gloves and aprons."

Learning lessons when things go wrong

- The provider responded to accidents and incidents and systems and processes were put in place to help minimise them reoccurring.
- We saw accidents and incidents were monitored to identify trends and patterns. Incidents were analysed and where lessons were learnt these were shared with the staff team.

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

Good: 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

- We looked at care records and found they considered people's needs, choices and preferences.
- Support plans had been developed with people which ensured their preferences and diverse needs were met in all areas of their support. This included protected characteristics under the Equality Act 2010 such as age, culture, religion and disability.
- People we spoke with told us they felt involved in their care.

Staff support: induction, training, skills and experience

- Staff received training and support to carry out their role effectively.
- The provider had an in-depth induction package which included training and shadowing experienced care workers. One member of staff said, "I was mentored by two senior care workers, both were fantastic, so I learned a lot and felt completely confident to go out on my own."
- People we spoke with felt staff knew them well and were trained to carry out the tasks expected of them. One person said, "They [staff] all seem well trained and to have the skills that they need. Everyone has been extremely kind and helpful to me, I have no regrets in using this company at all. Everything that they [staff] do, they do properly, and they enhance my day to day life."

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

- People were supported with dietary needs and nutritional intake when required.
- Care records we viewed included support people required during meal times such as pureed diets and thickened fluids.
- People we spoke with said, "They [staff] do my lunch and are very good and will even ask me which sauces I would like today," and, "They [staff] do lunches and prepare it well, as I like it. They [staff] know me well and we have become friends. They [staff] always make sure we both have a cup of tea before they leave."

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

- People had access to healthcare professionals when they required their support.

- Care records we looked at contained information relating to healthcare and how to support people in line with any recommendations from healthcare professionals.
- Staff described to us how they worked with district nurses, occupational therapists and other health and social care professionals to make sure people had the equipment and support they needed. For example, a care worker described how they had highlighted a deterioration in someone's mobility. They said the management team had arranged for the person to be reassessed by the occupational therapist. We were also told how another care worker had informed the district nurse that the person's pain medication was not effective any longer. This prompted a review of their medication.

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.
- Staff we spoke with were knowledgeable the Mental Capacity Act and were committed in ensuring people were involved in their care and support.

Our findings

Caring – this means we looked for evidence that the service involved people and treated them with compassion, kindness, dignity and respect.

Good: People were supported and treated with dignity and respect; and involved as partners in their care.

Ensuring people are well treated and supported; equality and diversity

- People were treated with kindness, respect and compassion.
- People we spoke with consistently reported the service to be extremely caring. People felt they had developed strong bonds with the care staff. One person said, "The girls are very good to me. They are very pleasant." Another person said, "They [staff] like me and I like them. They [staff] are so kind to me and Audley Care throughout have been kindness itself to me. I really couldn't ask for better." Another person said, "The staff are always friendly and caring."

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

- People we spoke with told us they felt involved in their care and felt they were at the centre of any decisions which were made about them.
- Staff said people were included in decision making about their care. This started when they took part in an initial assessment of their needs, which was used to complete their care plan.

Respecting and promoting people's privacy, dignity and independence

- Relatives we spoke with felt their family members were treated with respect and their dignity was upheld. One person said, "This company and the carers deserve every bit of positive feedback. I like them all. They [staff] chat with me as they are showering me, and they really encourage me with my independence. I have improved a lot as a direct result of their care."
- The service ensured they maintained their responsibilities in line with the General Data Protection Regulation (GDPR). GDPR is a legal framework that sets guidelines for the collection and processing of personal information of individuals. Records were stored safely which maintained people's confidentiality.

Our findings

Responsive – this means we looked for evidence that the service met people's needs.

Good: People's needs were met through good organisation and delivery.

Planning personalised care to meet people's needs, preferences, interests and give them choice and control

- We looked at people's care records and found they were person centred and reflected their needs and preferences.
- People we spoke with felt in control of their care and support and had developed good relationships with the staff. One person said, "I can contact any of them at the office very quickly and easily and I know that they would do all that they could to be of help. If I call them at any time they will send somebody straight round to me." Another person said, "I have a care plan and they [staff] do review it with me and ask my opinions on my care. They have inputted a great deal with my overall improvement. I know I could approach them if I had any concerns. The good thing is that they know us and have become like friends."
- The service responded well in cases of emergency. One person told us how the provider had responded in a timely way, when they required support in an emergency situation. The person said, "We called the number, and someone quickly came. They [staff] stayed with us until I had seen a doctor and then made sure we were alright."
- People who used the service had access to the facilities on the retirement village such as the restaurant, bistro, swimming pool and hair salon. Some people were supported by staff to attend various functions such as seasonal parties and coffee mornings.
- Staff also supported people to attend events in the local community. For example, some people used the dementia café, supported by staff.
- Staff described how people's care visits could be flexible to meet their needs. For instance, one care worker told us how on some days she sat and talked with someone before offering them their medication because this worked best on days when the person was unsettled. Other care workers told us how care visits could be cancelled, or times changed if someone was going out with family or had an appointment.

Improving care quality in response to complaints or concerns

- The provider had a complaints procedure and people told us they knew how to raise concerns if they needed to.
- People were confident that concerns would be appropriately addressed and action taken to improve the service. One person said, "The office staff are easily accessible and very helpful when you ring them. I feel cared for and I feel listened to. I have never complained but I did ring them when someone didn't arrive, and

they dealt with it straight away."

- The registered manager kept a log of concerns and actions taken to resolve them. We saw that the provider's complaints procedure had been followed appropriately.

End of life care and support

- The provider had systems in place to ensure people were appropriately supported at the end of their life.

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.

Good: 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

- The service had a registered manager who was supported by a deputy manager and a quality care supervisor.
- The management team and the care workers were clear about their roles and responsibilities and were dedicated in ensuring high quality care was provided to people who used the service.
- Staff we spoke with felt valued by the provider and were recognised for their achievements. For example, the service nominated an employee of the month in recognition of good feedback received and their overall performance in their role.

Planning and promoting person-centred, high-quality care and support with openness; and how the provider understands and acts on their duty of candour responsibility

- We spoke with people who used the service and they were extremely complimentary about the management team and provider. One person said, "This company are business like and very efficient. All the staff, including those in the office are very helpful and they really are improving my life. I wouldn't change a thing. I can say most sincerely that I am very happy with Audley Care. I consider myself very fortunate to receive such good care." Another person said, "The managers are all lovely. I can't suggest anything that needs to be improved. Everyone is very helpful, and we are extremely happy overall."
- Without exception staff said they felt very well supported by the management team. They said they could call or visit the office at any time for help and support, or just to have a chat. One care worker said, "The manager is brilliant, very encouraging and helpful."

Continuous learning and improving care

- The management team had systems in place to ensure the service was operating effectively.
- The management team were all keen to learn and were dedicated to improving care for people who used the service. Audley care was committed to ensuring the service continued to meet people's needs. To ensure

this was maintained the service completed an initial care and risk assessment management plan, held a six-monthly face to face review, had random reviews as part of monitoring and observations, annual update of care and risk management plans and carried out an annual customer survey.

- The provider also had an internal audit process where a regional care operations manager completed internal audits. An improvement plan was drawn up from the audit tool findings and the registered manager completed the actions identified.
- The management team also completed audits such as medicine audits. A daily audit on 5 electronic medication administration records [EMAR's] was completed.
- Part of the provider's monitoring included the staff support system. Every time supervisions took place an audit was completed for the people the staff member supported. This included looking at daily logs, and EMAR's. Any trends were fed back to the care worker concerned and actioned. A regional audit was completed every quarter on 10 care files. Actions were identified, and an improvement plan put in place. Each time the regional manager visited to complete the audit they ensured the service had progressed.
- Staff demonstrated a good understanding of the company's values and were open and honest when answering our questions. They said the service was very inclusive and they were encouraged to raise concerns.

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

- People who used the service, their relatives and staff, were involved in the service and their views and opinions mattered.
- People were asked to take part in an annual quality assurance questionnaire. This was an opportunity to give feedback about the service.
- People we spoke with felt they could give continuous feedback and felt the management team were interested in their views.
- A newsletter was available to people who used the service. This informed people of the news, events and announcements of the service.

Working in partnership with others

- The provider had taken on board issues raised by other professionals as a result of visits and audits.
- People who used the service had access to the facilities on the retirement village. People were also supported to access the dementia café which was held in the local community.
- The service had a manager's supper where people could chat about the village but also about care issues if they were in receipt of care.