

Fanco Ltd

Avant Healthcare Services Manchester South

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

Avant Healthcare Services Manchester South is a domiciliary care agency. The service was wholly owned by Fanco Ltd but operated as part of a franchise (Avant Healthcare Services). During our inspection the provider changed the agency name from Fanco Ltd to Avant Healthcare Services Manchester South. Not everyone who used the service received personal care. CQC only inspects where people receive personal care. This is help with tasks such as personal hygiene and eating. Where they do, we also consider any wider social care provided. At the time of the inspection the agency was providing personal care to 3 people.

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

People felt safe using the service. Visits were well organised and people received support from staff they knew. Safe systems of staff recruitment were in place. Medicines were managed and administered safely.

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. Staff received the support and training they needed to carry out their roles effectively. The provider was working within the principles of the Mental Capacity Act 2005 (MCA.)

People liked the staff who supported them. People were treated with compassion and respect. Staff knew people well and enjoyed their work.

Care records were detailed and person centred. They contained sufficient detail to guide staff on the care and support people needed. There was an appropriate system to manage complaints.

Robust systems of quality assurance checks and audits were now in place. People were positive about the way the service was run and organised. The registered manager was committed to providing person centred care and support. People spoke highly of the registered manager.

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

Rating at last inspection and update.

The last rating for this service was requires improvement (published March 2019) and there was one breach of regulations in relation to governance.

The provider completed an action plan after the last inspection to show what they would do and by when to improve. At this inspection we found improvements had been made and the provider was no longer in breach of regulations.

Why we inspected

This was a planned inspection based on the previous rating.

Follow up

We will continue to monitor information we receive about the service until we return to visit as per our re-inspection programme. If we receive any concerning information we may inspect sooner.

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 ●

Avant Healthcare Services Manchester South

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 2014.

Inspection team

The inspection was undertaken 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.

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

The inspection was announced. We gave the service 48 hours' notice of the inspection. This was because 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 February 2020 and ended on 2 March 2020. We visited the office location on the first day.

What we did before inspection

The provider was not asked to submit a provider information return prior to this inspection. This is information we require providers to send us to give some key information about the service, what the service

does well and improvements they plan to make. We reviewed information we had received about the service. We sought feedback from the local authority involved with the service and Healthwatch Manchester for their views on the service. Healthwatch is an independent consumer champion that gathers and represents the views of the public about health and social care services in England. We used all of this information to plan our inspection.

During the inspection

We spoke on the telephone with two people who used the service. On gaining permission we visited one person who used the service and their relative in their home. We also spoke with five members of staff including the registered manager, managing director, operations manager for the franchiser and support workers.

We reviewed a range of records. This included two people's care records, medication records and other records of care provided. We looked at two staff files in relation to recruitment. A variety of records relating to the management of the service, including training and policies and procedures were reviewed.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We reviewed training data and policies sent to us.

Is the service safe?

Our findings

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

At the last inspection this key question was rated as requires improvement. At this inspection this key question has now improved to good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People were protected from abuse and avoidable harm. The provider followed the local authority safeguarding procedures.
- Staff had received training in safeguarding people from abuse and were aware of their responsibilities for raising any concerns they had. They were confident any concerns they raised would be dealt with appropriately. One staff member said, "I would immediately get hold of [registered manager]. She would deal with it definitely."
- People felt safe with the staff who visited their homes. One person said, "Safe? Oh yes. most definitely."

Assessing risk, safety monitoring and management

- Risks to people's safety were identified and well managed. This included risks for individuals, within their home environments and for staff.
- There was a plan to guide staff on what to do in the event of an emergency that could threaten delivery of the service.

Staffing and recruitment

- There were safe systems for staff recruitment in place. All required checks on people's backgrounds and character were completed prior to staff starting to work at the service. This helped to ensure they were appropriate to work with vulnerable people.
- People told us they had continuity of care and were visited by the same staff. One person said, "You get the same person [staff]. You don't get messed about. It's always the same person. If my regular can't come it's always the same relief person."
- Staff told us they had time to get to know people. They said, "I like to chatter. Its real fun as well" and "We have the same clients, so we get to know people."

Using medicines safely

- Medicines were managed and administered safely. Since our last inspection improvements to how medicines administration was recorded had been made.
- Staff had received training in the administration of medicines and had their competency to administer checked.

Preventing and controlling infection

- There were systems in place to prevent the spread of infection or disease.
- Staff had completed training in infection prevention. Personal protective equipment was available and

used by staff when providing personal care.

- One person said, "They [staff] always wear gloves and aprons [when completing personal care tasks]."

Learning lessons when things go wrong

- Records were kept of accidents or incidents that occurred to people who used the service and to staff. The registered manager monitored accidents and incidents and identified any lessons that could be learned to prevent future occurrences.

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.

At the last inspection this key question was rated as good. At this inspection this key question remained the same. 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

- Peoples' support need were assessed by the registered manager before they started to use the service. This helped to ensure staff could meet people's needs.
- The registered manager contacted people one week after they started to use the service to check if their needs were being met.
- People told us the service was well organised and visits were rarely late and never missed. People told us, "They are always on time and they never miss my calls" and "In the past I have had some [other agencies] that you don't know who is coming. There is none of that nonsense with these. No missed or late calls."

Staff support: induction, training, skills and experience

- Staff had the skills, knowledge and experience they needed to carry out their roles effectively.
- Staff completed an induction and a range of training the provider considered mandatory. Staff were able to attend additional courses where they had an interest or the person they were working with had a specific condition. Staff told us the training was good. One said, "We get a lot of training. It's very helpful."
- Staff felt supported. One staff member said, "Its lovely. I feel really supported."

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

- People lived in their own homes and could eat what they wanted.
- Staff had received training in nutrition and food hygiene.

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

- Care records identified people's health conditions and how these may affect them.
- Where health care professionals had provided guidance, this was recorded in peoples' care records.

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 provider was working within the principles of the MCA. People's capacity to make decisions was assessed and regularly reviewed.
- Records guided staff in how they could help people make decisions.

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.

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. 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

- People were treated with compassion and respect. Staff knew people well and told us they enjoyed their work. Staff said, "It's great. I enjoy doing the work. I enjoy helping people" and "It's so rewarding. I feel like I have made a difference when [people] smile."
- People told us they liked the staff who supported them. One person said, "[Staff name] is smashing." Another said of staff, "They are nice and polite. They always ask, is there anything else I can do for you?"
- We looked at whether the service complied with the Equality Act 2010 and how the service ensured people were not treated unfairly because of any characteristics protected under the legislation. Observations of care, review of records and discussion with the registered manager, staff and people demonstrated that discrimination was not a feature of the service.

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

- People, and where appropriate their representatives, were involved in all decisions about the care and support they received.
- Staff demonstrated they respected people's choices. They said, "I respect people. I don't make [person who used the service] do anything. I gauge [persons] mood. I can tell if [person] doesn't want to do something. You get to know people."

Respecting and promoting people's privacy, dignity and independence

- People were treated with dignity and respect. Staff gave us examples of how they helped to maintain people's independence.
- People's right to confidentiality was respected. Policies and procedures showed the service placed importance on protecting people's confidential information.

Is the service responsive?

Our findings

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

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. 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

- Care records were person centred and reflected people's likes, dislikes and preferences. They were written respectfully and gave very specific detail about how people liked their support provided.
- People told us staff listened to them and provided the care and support they wanted. People told us, "They do what I want" and "They do everything you wish them to."
- The registered manager reviewed the care provided regularly. People told us the registered manager contacted them regularly to ask if their needs were being met. One person said, "They do come to ask if everything is ok."

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.

- Information was available in alternative formats including large print and easy read formats. It was also available in alternative languages for people where English was not their first language.

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 interests and hobbies were identified in the care records. One person was regularly supported to go out into the countryside. This was very important to them.

Improving care quality in response to complaints or concerns

- There was an appropriate system in place to manage complaints. The registered manager ensured action was taken if lessons could be learned to improve the service.
- People knew how to make a complaint but told us they didn't have any complaints. People said, "I have no complaints" and "I have the phone number. I would get in touch no problem. But it goes like clockwork."

End of life care and support

- The service was not supporting anyone with end of life care. People's wishes for end of life care and support were identified and recorded if they wished.

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 the last inspection this key question was rated as requires improvement. At this inspection this key question has now improved to good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

At our last inspection effective systems were not operated to monitor, assess and improve the quality and safety of the service. This was a breach of regulation 17 (Good governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 17.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements

- Robust systems of daily, weekly and monthly quality assurance checks and audits were now in place. This included regular spot checks of staff performance. An electronic system flagged if any of the checks had not been completed by the due date.
- The registered manager told us they worked closely with the operations manager from the franchise company. This included regular meetings with the operations manager and monitoring of audits by staff who worked for the franchiser.
- People who used the service were very positive about the way the service was run and organised. People told us, "They are smashing. I would recommend them" and "It's absolutely marvellous." Staff told us they enjoyed working for the service. One staff member said of the company, "It's so good."

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

- The registered manager knew people well and was committed to ensuring people received person centred care and support.
- People told us they could always get hold of the registered manager if they needed to. People said, "My [relative] can get hold of the office when [person] wants to" and "They are always on the end of the phone if I need help."
- Staff were very positive about the registered manager and the way they managed the service. They said, "[Registered manager is a very helpful person" and "[Registered manager] is great. She keeps me informed. She is available all the time."

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 their responsibility regarding duty of candour and was aware of

their responsibility to notify CQC of significant events, such as safeguarding concerns.

- It is a requirement the provider displays the rating from the last CQC inspection. We saw the rating was displayed on the providers website and in the office.

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

- People were asked about their experience of the service. The registered manager was in regular contact with people who used the service, to ask if they were satisfied with the care and support they received. They were planning to send a customer survey out in March 2020.
- Staff felt valued and were able to put forward ideas to the registered manager. One said, "We see [registered manager] all the time."

Continuous learning and improving care; Working in partnership with others

- The registered manager had a system in place that enabled them to review any accident, incident, safeguarding or complaint. This helped ensure they could identify good practice and where improvements needed to be made.
- The service had a range of policies and procedures to guide staff on what was expected of them in their roles.