

Miss Beverley Williams

# AJ and Friends

## Inspection report

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Date of inspection visit:  
24 September 2021

Date of publication:  
08 November 2021

## Ratings

Overall rating for this service

Outstanding 

Is the service safe?

Good 

Is the service effective?

Good 

Is the service caring?

Outstanding 

Is the service responsive?

Good 

Is the service well-led?

Outstanding 

# Summary of findings

## Overall summary

### About the service

AJ and Friends provides personal care and support to young people in their own homes. The service supports people with complex physical health needs and people with autism and/or learning delays. 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. At the time of our inspection the service was supporting five people with personal care.

### People's experience of using the service and what we found

Family members spoke enthusiastically about how consistently kind and caring the provider and staff were and the positive impact this had on their relative's lives. They told us their own lives had been enriched by the support they and their relatives received from the provider and staff. One family member told us, "I would be lost without them [staff and provider]. They have been my rock."

Staff were highly motivated to provide person-centred, compassionate care that celebrated people's unique characteristics. A manager told us, "I am proud of what we do, who we are and what we stand for. We just want them [people] to be happy. We want to make a difference to these [people's] lives."

The provider showed immense passion and desire to provide people and their family members with care and support that enabled them all to live a better life. The provider's own personal experiences had been the driving force behind the development of the service and the wider support they offered. Family members and professionals described the provider as 'brilliant', 'amazing', 'a knight in shining armour' and 'heart of gold'.

It was clear that staff understood and shared the provider's vision and values and were proud to work for the service. One staff member told us, "It is very clear [provider] is all about the [people] and the families. She is very passionate about what she does."

The provider demonstrated a high level of experience and capability to deliver excellent care; they were extremely knowledgeable and enthusiastic and worked hard to continuously improve the service. Professionals spoke highly of the provider and the additional support they offered for people outside of the service. Extensive links with the community had been developed to bring greater awareness about young people living with disabilities.

Risks to people's health and well-being had been assessed and appropriate plans in place to manage identified risks and keep people safe. Family members told us they were confident their relatives were safe and well looked after by staff. Staff had received safeguarding training and knew what action to take if they had any concerns.

A holistic approach had been adopted in the assessing, planning and delivery of people's care and support.

Care plans were extremely detailed and identified intended outcomes for people.

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.

People received care that was based on their individual needs and preferences. Staff supported and encouraged people to access activities they liked. Family members spoke positively about the impact these activities had on their relative's social skills and communication.

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 the last inspection

This service was registered with us on 24 September 2019 and this is the first inspection.

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?

This service was safe.

Details are in our safe findings below.

Good ●

### Is the service effective?

This service was effective.

Details are in our effective findings below.

Good ●

### Is the service caring?

This service was exceptionally caring.

Details are in our caring findings below.

Outstanding ☆

### Is the service responsive?

This service was responsive.

Details are in our responsive findings below.

Good ●

### Is the service well-led?

This service was extremely well-led.

Details are in our well-led findings below.

Outstanding ☆

# AJ and Friends

## 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

This inspection was carried out by one inspector.

#### Service and service type

This service is a domiciliary care agency. It provides personal care to people living in their own homes.

The service had a manager registered with the Care Quality Commission. This means that they and the provider are legally responsible for how the service is run and for the quality and safety of the care provided.

#### Notice of inspection

We gave the service 24 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 24 September 2021 and ended on 7 October 2021.

#### What we did before the inspection

We reviewed information we had received about the service since it was registered with us. We sought feedback from a number of local authorities and professionals who work with the service. The provider was not asked to complete 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 took this into account when we inspected the service and made the judgements in this report. We used all of this information to plan our inspection.

#### During the inspection

We spoke with three family members to gain their feedback about the care their relative's received. We sought feedback from four staff members, the registered manager (who is also the provider) and a trainee manager. We received feedback from two professionals who work closely with the service and people supported.

We reviewed a range of records. This included three people's care records, four staff files in relation to recruitment and staff supervision, and a variety of records relating to the management of the service, including policies and procedures.

# 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 for this newly registered service. This key question has been rated good. This meant people were safe and protected from avoidable harm.

### Assessing risk, safety monitoring and management

- Risks to people's health and well-being had been assessed and detailed plans were in place to keep them safe from avoidable harm.
- Some people supported had complex health conditions. Family members and external professionals spoke positively about the level of care people received to keep them safe and prevent deterioration in health.
- The registered manager thoroughly assessed risks associated with being out in the community to allow for people to be supported in the least restrictive way possible.
- Family members told us they felt reassured their relatives were safe. Comments included; "[Name] is definitely safe with them [staff]. They always ring me if there are any concerns. I feel so reassured" and "I feel totally relaxed. They [staff] really do manage his [health condition] really well."

### Staffing and recruitment

- There were enough staff to meet people's needs and keep them safe from harm.
- Family members told us their relatives received support from regular staff who knew them well. One family member told us; "It's usually [staff name] and [staff name] that come. It has really helped [relative name] build trust with them."
- Staff told us they received their rotas in advance but were happy to provide additional support where needed. One staff member told us; "I get my rota in advance so I know what I am working but I am more than happy to be flexible if it's needed."
- Safe recruitment processes were in place. Appropriate checks were completed on new applicants to ensure their suitability for the role.

### Using medicines safely

- Medicines were managed safely by appropriately trained staff who received regular checks and observations on their practice to ensure it was safe.
- Where people required support with their medicines this was clearly recorded in their care plans. Detailed guidance was available to staff to ensure medicines were safely administered.
- Where necessary, staff received additional training from external health professionals to enable them to administer medication for specific conditions, such as diabetes.

### Systems and processes to safeguard people from the risk of abuse; Learning lessons when things go wrong

- Systems were in place to safeguard people from abuse and prevent further incidents from occurring.
- Staff received safeguarding training and knew how to identify and respond to any incidents of concern.

- Care plans contained person-centred information and guidance to ensure safeguarding concerns were responded to in line with each person's individual needs.
- The registered manager kept a record of any safeguarding concerns. Where concerns were identified, appropriate action was taken and relevant professionals notified.
- Accidents and incidents were recorded in detail and regularly reviewed by the registered manager to look for patterns or triggers. Action was taken where required to prevent further incidents from occurring.

#### Preventing and controlling infection

- Robust systems were in place to prevent the spread of infection and keep people safe.
- Staff received training and guidance in relation to infection prevention and control and were provided with regular updates, specifically in relation to COVID-19.
- Staff had access to PPE and family members told us staff followed correct guidance on its use.



# 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

- The service adopted an holistic approach to assessing, planning and delivering care and support to people.
- The registered manager worked closely with health and social care professionals to complete thorough assessments of people's needs before providing them with support. One professional told us, "On the initial visit to meet family, [registered manager] was able to make them feel at ease with her open and honest approach remaining [person] focused."
- Care plans were regularly reviewed by the registered manager to ensure they fully reflected people's constantly evolving needs.
- Family members told us they were fully involved in the assessment process and records confirmed this. One family member told us. "I was involved in the planning. It's a comprehensive care plan. [Registered manager] really took on board my input."

Staff support: induction, training, skills and experience

- Newly recruited staff received an induction and shadowed more experienced staff before providing people with support. One staff member told us; "The induction was really detailed. I felt confident supporting people and I could ask as many questions as I needed. The support was always there."
- Staff received training appropriate to their role and the needs of the people supported.
- Family members told us they were confident that staff knew what how to support their relatives in order to meet their needs and keep them safe. One family member told us; "They [staff] know him so well. They know what he needs and likes and they really do know what they are doing. I would be lost without them."
- Staff received regular supervision and appraisals to enable them to discuss any concerns or development needs. One staff member said; "I've just recently had supervision. [Registered manager] was brilliant, I could talk to her and she is so supportive."

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

- Where people needed support with their food and drink intake, this was clearly recorded in their care plan.
- Staff encouraged people to eat a varied diet and worked hard to introduce them to new foods. For example, one person at the start of being supported would only eat two meals. Due to staff constantly providing other options, this person now eats a more varied diet.
- Where risks associated with food and drink intake were identified, detailed plans were in place to help manage these safely and effectively.

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

- Staff worked with external health and social care professionals to provide effective care and promote positive outcomes. One family member told us, "They [staff] work closely with [health team] at [hospital name] to help manage his [health condition] safely. They go above and beyond."
- Professionals spoke highly of the service and the working relationship they had developed. One professional told us, "[Registered manager] follows the local authority's service agreement and the person's bespoke package of support and will share updates and progress reports."
- Staff supported people to access health professionals where needed. One family member told us. "They [staff] always help with getting access to health professionals. I can't fault them."

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.

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 not currently supporting anyone with authorisations to deprive them of their liberty. However, the registered manager was aware of their responsibilities regarding this process.
- The registered manager told us staff used the least restrictive practice possible when supporting people. This enabled people to develop independence and feel empowered.
- Staff understood the importance of offering choice and seeking people's consent prior to providing care and support.

# 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 outstanding. This meant people were truly respected and valued as individuals; and empowered as partners in their care in an exceptional service.

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

- Staff were highly motivated to provide kind and compassionate care. The strong, visible person-centred culture had resulted in positive impacts on people's lives.
- Staff had developed extremely positive and trusting relationships with people which had enriched people's lives. Family members told us; "It is so cute to hear [relative] talking with [staff name] the way he does and hearing the way they talk to each other and interact. They [staff] bring the best out in him" and "Initially [relative] wouldn't even get out of the car when they [staff] took him out. But now he loves it and gets straight out. He runs straight out to them and takes their hand."
- Family members enthused about how the provider and staff went above and beyond to give them and their relatives a better quality of life. Comments included; "They [staff and provider] have been a massive help. I can't sing their praises enough. Absolutely nothing phases them, they are so calm" and "I have never seen him [relative] so happy. He is loving life at the minute."
- The provider and staff demonstrated a real empathy for the people they supported and their families. They cared for them in ways that exceeded expectations. Comments included, "[Provider] has been brilliant. I would be lost without them [provider and staff]. They have been amazing. I could just cry" and "They [staff] are fantastic. They know exactly how to sooth him and distract him."
- Professionals spoke highly of the person-centred care and support people received and the empathy the provider and staff had for people's individual needs, characteristics and differences. One professional told us, "[Provider] and her team are able to recognise and indeed celebrate the uniqueness of individual people and provide the appropriate support necessary to maintain the family dynamic."

Respecting and promoting people's privacy, dignity and independence; Supporting people to express their views and be involved in making decisions about their care

- Respecting people's dignity and privacy was at the heart of the service's culture and values and was embedded in everything the staff did. One professional told us, "Since the service has supported [person] the house and her appearance are a lot cleaner as they [staff] maintain the immediate area and her personal hygiene and promote independence."
- Staff were keen to promote independence and develop people's skills and integrated this into their daily support. For example, staff were working with one young person to develop daily skills such as cooking. One staff member told us, "Some of the [young people] we support don't go to school, so we use activities to introduce learning and help them develop."
- Staff empowered people to express their views in a way they were able to.
- The relationships developed between staff and people meant staff were able to understand what they

wanted by their body language and gestures and how they responded to particular situations. One family member told us, "[Name] is non-verbal. They [staff] just get him. They know exactly what he wants or needs just through his body language and facial expressions."

- Some people were unable to make decisions about their care. Staff ensured the views and opinions of their family members and professionals with the legal authority to do so, were fully listened to and considered.

# 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 supported had varied lives and received care that was personalised to their needs and wishes. One professional commented, "There have been positive changes as [name] grows in confidence, social skills and overall improved well-being."
- Family members told us staff knew their relatives well and spoke positively about the support they provided. Comments included; "[Relative name] is non-verbal but they [staff] are really good at picking up on his emotions. They know exactly what he needs" and "They [staff] are so in tune with him [relative] and what he needs and likes. They know what helps him to engage. They know all about him and what he enjoys."
- Staff completed detailed daily logs to show what support people had received, activities they had completed and how they engaged. The level of detail showed evidence staff knew people well and had developed positive relationships with them.
- Daily logs were regularly reviewed by managers to ensure care and support remained person-centred and in-line with people's needs and wishes.

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 were supported to access activities that reflected their personal choices and preferences.
- Family members spoke positively about the impact activities had on their relative. Comments included; "He [relative] just loves going out, they [staff] take him to all sorts of places. Initially he wouldn't even get out the car, now he loves it and gets straight out" and "Staff take him [relative] out, he loves it. AJ and Friends is so much more structured, we get feedback from staff and it helps so that we can see if certain activities have worked or not."
- The registered manager told us they had recently purchased a company vehicle to enable staff to take people out on a longer day trips in a safe way.
- Staff told us they often organised trips and activities to allow people supported to socialise together and build friendships with each other.

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.

- People's communication needs were considered as part of the assessment process.

- Staff used effective communication methods with the people they supported in order to understand their day-to-day needs and choices.

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

- Family members had access to information about how to make a complaint. No complaints had been received at the time of our inspection.
- Family members told us they had not felt the need to raise any complaints or concerns but knew who to contact if they did. One family member told us, "I have never had to make a complaint. The staff and [registered manager] are just brilliant."

#### End of life care and support

- The service was not supporting anyone with end-of-life care at the time of our inspection.
- The registered manager told us some people they supported had life-limiting conditions which meant care and support was continuously evolving to ensure their needs were met in a person-centred way.

# 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 outstanding. This meant service leadership was exceptional and distinctive. Leaders and the service culture they created drove and improved high-quality, person-centred care.

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

- The provider's own personal experience of supporting someone close to them with complex needs, had been instrumental in the creation and development of the service. "One family member told us, "[Provider] just gets it. She has been through it, so she knows how hard it is. You can see how passionate she is to help us."
- Due to the high-quality care and extremely person-centred culture of the service, people's lives had been enriched. For example, one person had refused to engage with other organisations but had fully engaged with AJ and Friends' staff. Their family member told us, "He [relative] is loving life at the minute. I have never seen him so happy."
- Professionals provided exceptional feedback about the level of support people received. One professional told us, "I would describe AJ and Friends as person/family focused, accommodating, nurturing, ethical, non-judgmental and solution focussed. [Provider] has a heart of gold and willing to go the extra mile to achieve the best possible outcome for people."
- The culture of the service was caring and focused on putting people and family members first. One family member told us, "When [social care] recommended AJ and Friends, [provider] jumped straight on board. She was just there. She didn't care about money. She just helped with everything. [Relative name] Just took to them [staff] straight away."
- Family member's lives had been greatly improved as a result of the registered manager's vision and values. One family member told us, "[Provider] has been my rock. She has been so supportive. I would be lost without her." Another told us "I don't know what I would do without her [provider] or the staff. I wouldn't be able to work. It's as simple as that. She enables us to live our life the way we do."

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

- The provider was compassionate and inclusive and had showed a high level of experience and knowledge to deliver excellent care. One professional told us, "[Provider] has demonstrated a wealth of experience, skill and passion in relationships across the spectrum of social care, stepping in often at very short notice to provide additional support."
- The provider was also the registered manager of the service. They were supported by a trainee manager. Both worked extremely well together to provide high quality care. One staff member told us, "They [managers] just bounce of each other. They both want the same for all the people and families we support. As managers, they are just fantastic."

- Staff understood the provider's vision and were keen to promote this through the daily care and support they provided. One staff member told us, "[Provider] is so passionate. She just wants the best for the [people] and their families. She goes above and beyond for them." Another told us, "I am so proud to work for the service. I love it. Seeing the development in people and the impact it has on family is just brilliant."

Working in partnership with others; Continuous learning and improving care

- Highly effective collaborative working with external agencies and organisations had resulted in improved lives for both people supported and their families. One professional told us, "[Provider] has arranged a number of outreach support packages to enable people to engage in activities outside of the family unit and build on their social skills. This not only provides life enhancing opportunities but also enables [family members] to recharge their batteries."
- The provider was passionate about extending support to people outside of the service and within the wider community. For example, facilitating family therapy, deafness support, suicide awareness and bespoke support to stabilise individual placements.
- By utilising their extensive skills and experience, the provider was able to work with professionals to support a young person with a hearing impairment and behaviours that challenge transition effectively into a new home.
- External organisations had recognised the provider's passion for providing people with complex needs access to more meaningful activities. This included being approached by a local business to support with the development of a new gaming device.
- The provider worked closely with a number of charity organisations, local forums and community groups to offer support to the local community and raise awareness about disability and wheelchair access.
- The provider recognised the need to support young people with complex needs and life-limiting conditions on a longer-term basis. They were currently in the process of setting up a residential service to enable this level of support.

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

- The provider regularly engaged with people, family members and staff to ensure they were kept up-to-date about the service and to give them the opportunity to share their views.
- Staff told us they received regular updates and felt able to offer their views and opinions about the service and the people they supported. One staff member said, "I always feel listened to. If I think something isn't working or needs changing, [provider] listens."
- Family members told us they were regularly contacted by the provider to discuss their relative's care and felt their views were always considered.

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 service promoted an open and honest culture. Staff felt confident that if concerns were raised, the provider would carry out necessary investigations and learning would be shared across the staff team.
- Relevant others including CQC were notified in a timely way about incidents, events and changes at the service.