

All Care Plus Limited

Allcare

Inspection report

104 The Commons
Colchester
CO3 4NW

Tel: 01206366361

Date of inspection visit:
20 July 2022
02 August 2022
05 August 2022

Date of publication:
03 October 2022

Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service well-led?

Requires Improvement ●

Summary of findings

Overall summary

About the service

Allcare is a domiciliary care service providing personal care to people in their own homes. CQC only inspects where people receive personal care. This is help with tasks related to personal hygiene and eating. Where people receive personal care we also consider any wider social care provided. At the time of the inspection the service was supporting a total of 27 people, all of whom received support with personal care.

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

People told us they felt safe and were happy with the service they received. The registered manager and staff were aware of their responsibility to raise safeguarding concerns and liaise with the local authority. The registered manager worked well with the local authority, CQC and other professionals. Safeguarding incidents, and complaints were investigated, and formal apologies had been provided.

Due to reasons outside the provider's control they had been delayed in providing information requested to help us evaluate how well they monitored the service. Review of the providers systems to assess and monitor the quality and safety of the service found these needed developing to ensure they were effective at identifying and driving improvement within the service.

At our previous inspection in April 2021 the provider's system used to arrange, and monitor visit times was not being utilised effectively to ensure people were receiving a consistent and reliable service. Analysis of a spreadsheet of planned vs actual visits for the month of June 2022 confirmed people were receiving a satisfactory service. Staff were allocated the same people in a geographical area to ensure consistency and reduce travel time and delays due to traffic. People and their relatives confirmed staff were usually on time, within the agreed timeframe. Where on the odd occasion carers were running late people told us they were called to let them know.

People and their relatives told, us the registered manager and office staff were approachable when they contacted the office and responded to requests for information. Complaints were investigated and responded to in a timely manner.

Medicines and risks to people who used the service were managed safely.

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

Rating at last inspection:

The last rating for this service was Good (published 20 April 2021). At our last inspection we recommended the provider needed to review its use of technology to improve the promptness of calls and drive improvements. At this inspection we found improvements had been made to ensure people received their calls within the expected timeframe.

Why we inspected

This inspection was prompted by a review of the information we held about this service. This was an 'inspection using remote technology'. This means we did not visit the office location and instead used technology such as electronic file sharing to gather information, and phone calls to engage with people using the service as part of this performance review and assessment.

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

Follow up

We will continue to monitor information we receive about the service, which will help inform when we next inspect.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

The service was safe.

Details are in our safe findings below.

Good ●

Is the service well-led?

The service was not always well-led.

Details are in our well-led findings below.

Requires Improvement ●

Allcare

Detailed findings

Background to this inspection

The inspection

We carried out this performance review and assessment under Section 46 of the Health and Social Care Act 2008 (the Act). We checked whether the provider was meeting the legal requirements of the regulations associated with the Act and looked at the quality of the service to provide a rating.

Unlike our standard approach to assessing performance, we did not physically visit the office of the location. This is a new approach we have introduced to reviewing and assessing performance of some care at home providers. Instead of visiting the office location we use technology such as electronic file sharing and video or phone calls to engage with people using the service and staff.

Inspection team

The inspection was carried out by one inspector between 20 July 2022 and 04 August 2022. An Expert by Experience spoke with people and their relatives over the telephone. 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

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

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

This inspection was announced. Inspection activity started on 20 July 2022 and ended on 04 August 2022.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. We used the information the provider sent us in the provider information return (PIR). This is information providers are

required to send us annually with key information about their service, what they do well, and improvements they plan to make. We used all this information to plan our inspection.

During the inspection

We spoke with three people who used the service and seven relatives about their experience of the care provided. We spoke with the registered manager and reviewed a range of records, relating to the management of the service, including staff recruitment, induction and supervision. policies and procedures.

After the inspection

We continued to seek clarification from the provider to validate evidence found.

Is the service safe?

Our findings

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

At our last inspection we rated this key question Good. The rating for this key question has remained Good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse; Assessing risk, safety monitoring and management

- People told us they felt safe using the service. One person told us, "Staff make me feel safe, they know what to do for me."
- People's relatives also told us they felt their loved ones were safe. One relative commented, "[Person] feels very safe with their carers, they have one carer twice a day. Their regular carer is lovely and always on time and if they have some time left, they will sit and chat with me. [Person] cooperates with them as they are regular, and they know them all".
- The registered manager was aware of their responsibility to raise safeguarding concerns and liaise with the local authority. They had proactively engaged with the local authority due to staffing issues which placed people at risk of not receiving their care, as planned.
- The registered manager told us people were safe, because they were confident their staff would speak up if they had concerns. Staff had access to safeguarding procedures and reported concerns if they had concerns about a person's care and treatment.
- The registered manager understood their responsibility to assess risks to people who used the service. This was confirmed in discussion with people and their relatives, comments included, "I was involved with [Person's] initial assessment and the care plan and it is followed properly," and "[Person] is hoisted and there are always two staff and the first one will wait for the other one, before they start."

Staffing and recruitment

- The registered manager maintained a correct balance of staff to meet people's needs through weekly rotas to allocate people the same carers at the same time across the week.
- Data reviewed from the provider's planned versus actual visits report for the month of June 2022, confirmed the majority of people received their calls on time, with 29% of calls being 15-45 minutes late. The provider has a 30-minute window to allotted visit times built into people's contracts to allow for delays. This is explained at their initial assessment prior to service.
- Feedback from people and their relatives was staff usually were on time, within the agreed timeframe. Where on the odd occasion carers were running late people told us they called to let them know. Comments included, "They are more or less on time, obviously they can't help traffic or if the person before has a problem they cannot just leave them. I am really pleased with them all, they ring me if they are running a bit late. They usually stay as long as they should but if everything is done, I let them go a bit early," and "I am not really aware of them being late, maybe once or twice but not often and never 45 minutes or more. It's usually only a few minutes."
- The provider information return reflected safe recruitment practices were in place to ensure staff were suitable to work with people in their own homes. All staff had checks completed before starting work with

the agency including satisfactory references and a DBS. Disclosure and Barring Service (DBS) checks provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.

Using medicines safely

- People and their relatives told us medicines were administered safely where this was part of the care package. Comments included, "Staff are very strict about giving [Person] their medication and it is recorded on their phones. I have never known it to run out, the main carer ensures they have plenty in stock," and "The most important thing they do for [Person] is give them their medicines. It's all given correctly at the proper times and then written up in the folder. That's very important."
- Where people needed support to take their medicines staff had received training and routine spot checks to ensure they were administering medicines correctly, and in accordance with prescribing instructions.
- The registered manager told us they carried out routine checks of people's medicines, including review of medicines administration records (MAR) to ensure people were receiving their medicines as prescribed.

Preventing and controlling infection

- Good infection prevention and control practices were in place. People and their relatives confirmed staff always wore the appropriate personal protective equipment. Comments included, "They all wear the PPE," and "They all wear the proper PPE."
- The provider's infection prevention and control policy was up to date.

Learning lessons when things go wrong

- The registered manager worked well with the local authority to investigate safeguarding concerns raised about staff shortages during COVID-19, staff not staying the allotted time, and staff not wearing PPE correctly.
- They investigated the issues raised and used the outcome to improve the service. They recruited new staff, including a new coordinator to build communication links with people who used the service, their families, and staff.

Is the service well-led?

Our findings

Well-led – this means we looked for evidence that service leadership, management and governance assured high-quality, person-centred care; supported learning and innovation; and promoted an open, fair culture.

At our last inspection we rated this key question Requires Improvement. At this inspection the rating for this key question has remained Requires Improvement.

This meant the service management and leadership was inconsistent. Leaders and the culture they created did not always support the delivery of high-quality, person-centred care.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Continuous learning and improving care

- At our previous inspection in April 2021 people using the service and their relatives raised issues about early, late or occasional missed calls. This was because the provider's systems used to arrange, and monitor visit times were not being utilised effectively to ensure people were receiving a consistent and reliable service. A lack of communication about delays was an added factor. At this inspection, feedback from people and their relatives confirmed improvements had been made.
- Review of the governance arrangements to assess and monitor the quality and safety of the service found these needed developing to ensure they were effective at identifying and driving improvement within the service.
- The two most recent audits conducted by the registered manager dated July and August 2022 focused on recent staffing issues and action taken but did not include an effective review of other areas of the quality and safety of the service.
- The registered manager audit carried out in July 2022, stated two care plans were reviewed, however there was no analysis to reflect what, if any changes or improvements were needed. Similarly, we requested the most recent medicines audits. Copies of people's MAR charts were provided, but there was no analysis of these records to ensure they were being completed correctly.
- The provider information return stated the provider regularly reviewed and captured people's feedback and checks on quality of care and the company, however the people and relatives spoken with said they did not remember completing any feedback forms. One person told us, "They [Allcare] did ring me once and ask me some questions about what I felt about the service, but that was a long time ago. I am happy with the service they provide for me."
- The registered manager told us to date they had contacted 12 people using the service, or their relatives via telephone monitoring calls to obtain feedback. We reviewed the information obtained from six monitoring calls. These all provided positive feedback, with comments such as "More than satisfied, absolutely wonderful lovely staff," and "They (staff) are brilliant, more than satisfied."
- Staff received mandatory updates to their training and completed courses to gain knowledge for specific areas or conditions for the people they supported.
- Senior staff carried out spot checks and monitored staff practice on a three-monthly basis. The registered

manager told us staff don't know seniors are attending. Spot checks cover all aspects of the person care, including moving and handling, medications, and the senior checks the care records are being completed correctly.

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:

- Where things had gone wrong the registered manager had been open and transparent with people, their relatives, the local authority and CQC.
- Recent staffing issues had impacted on people receiving their allotted calls. The registered manager took immediate action to address the issues, working with the local authority, advertising and recruiting new staff. They implemented their business contingency plans to ensure people received their visits and provided a formal apology where peoples' visits had been affected.
- Three complaints were received about the service in the last 12 months, mostly about timings of visits. However, peoples' feedback at this inspection was that timings had improved. Comments included, "They may run 5 or 10 mins late but that is all. Usually they are on time," and "They are sometimes late, but they always ring and tell me."
- People and their relatives told us they would know how to make a complaint, Comments included, "The manager in the office is very good and easy to talk with. I have never met any of the management, but they seem very good and approachable. They are responsive to any issues," and "I would know how to make a complaint if I needed to but haven't so far."

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

- The registered manager told us, despite a very difficult two years due to the COVID-19 pandemic, they had still been able to operate without causing too much disruption to the people using the service. This had allowed people to receive support from staff they knew. People told us, "They are all brilliant, I have no complaints," and "The service is excellent, and I cannot fault it."
- People and their relatives told us; they were happy with the service they received. Comments included, "They are nice and treat me respectfully", and "I am very pleased with them all, they [staff] are always on time and very good to me. I have regular carers and I get on well with them all."
- People and their relatives told us, they would contact the office if they had concerns, or the on-call service. One person told us, "The office are pleasant and easy to talk with. I would say they are positive about the way that things are run. I have never had to complain."
- Relatives comments included, "Management are very approachable, and the manager always rings me back even when they are very busy," and "I do have various numbers on my phone for managers, they are helpful."
- Opportunities for further staff training and career enhancement had been made available to all staff and various incentives had been implemented to lift staff morale post pandemic.

Working in partnership with others

- The registered manager told us they received good support from health professionals including district nurses, their local practice and the local hospice when they needed support where a person was needing end of life care.
- Where people had support from services, such as the Speech and language or multiple sclerosis team, staff worked with them to ensure any changes in people's care was communicated to the office, and their care plans updated. Where needed the multiple sclerosis team had provided training extra training to staff on how to use new equipment.
- The registered manager was aware of who to make referrals to if people's health deteriorated, including

the community nursing team and reablement services. They also worked with the reablement team to take on referrals where people were needing support at home following discharge from hospital.