

Arreta Care Limited

# Arreta Care Limited

## Inspection report

78A Bond Way  
Hednesford  
Cannock  
WS12 4SN

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20 October 2023

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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

Arreta Care is a care at home service operating both a domiciliary care service and a supported living service providing support to 23 people at the time of the inspection. The service provides support to both older people and younger people, some of whom may have a diagnosis of dementia, a physical disability and people with a learning disability and/or autistic people.

We expect health and social care providers to guarantee people with a learning disability and autistic people respect, equality, dignity, choices and independence and good access to local communities that most people take for granted. 'Right support, right care, right culture' is the guidance CQC follows to make assessments and judgements about services supporting people with a learning disability and autistic people and providers must have regard to it.

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

#### Right Support:

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 responsive to meet individual needs and staff demonstrated a commitment to ensuring people were able to live fulfilling lives. People's support focused on them having opportunities to gain new skills and become more independent. Staff supported people in a way which encouraged healthy relationships and people and their relatives spoke highly of the support they received.

People were made to feel safe by a staff team who were trained to recognise and respond to concerns of abuse and manage people's risks in a safe way. Medicines were managed in a safe way. People received consistent support from a staff team who were punctual and who knew people's needs well.

People, where necessary accessed healthcare as required and were supported to maintain healthy lifestyles. Care plans were detailed and gave staff the information they needed to be able to care and support people in the most effective way. People's preferences were assessed and recorded.

#### Right Care:

Care was person-centred and promoted people's privacy and dignity. There were enough staff on duty to meet people's needs. People achieved good outcomes from their care.

People were given choice and the opportunity to participate in the planning of their care needs. There was a complaints procedure with which people were familiar and people knew how to make a complaint. Staff worked well with other agencies to ensure people received consistent and timely support.

#### Right Culture:

There were systems in place to identify when things went wrong and learning adopted to prevent future occurrences.

The registered manager and the management team were pro-active continually looking at ways to improve people's lives and make people's homes safe and comfortable places to live.

The registered manager adopted an open culture where staff felt valued and proud. The provider and registered manager worked well with other agencies and organisations to improve the quality of care people received.

For more details, please see the full report which is on the CQC website at [www.cqc.org.uk](http://www.cqc.org.uk)

#### Rating at last inspection

This service was registered with us on 5 March 2020 and this is the first inspection.

#### Why we inspected

This inspection was prompted by a review of the information we held about this service. The inspection was prompted in part by notification of an incident following which a person using the service died. This incident is subject to further investigation by CQC as to whether any regulatory action should be taken. As a result, this inspection did not examine the circumstances of the incident. However, the information shared with CQC about the incident indicated potential concerns about the management of risk of choking. This inspection examined those risks.

We found no evidence during this inspection that people were at risk of harm from this concern.

#### 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?

Good ●

The service was safe.

Details are in our safe findings below.

### Is the service effective?

Good ●

The service was effective.

Details are in our effective findings below.

### Is the service caring?

Good ●

The service was caring.

Details are in our caring findings below.

### Is the service responsive?

Good ●

The service was responsive.

Details are in our responsive findings below.

### Is the service well-led?

Good ●

The service was well-led.

Details are in our well-led findings below.

# Arreta Care Limited

## Detailed findings

### Background to this inspection

#### The inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 (the Act) as part of our regulatory functions. We checked whether the provider was meeting the legal requirements and regulations associated with the Act. We looked at the overall quality of the service and provided a rating for the service under the Health and Social Care Act 2008.

#### Inspection team

The inspection was carried out by 2 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

This service is a domiciliary care agency. It provides personal care to people living in their own houses and flats and specialist housing.

This service also provides care and support to people living in a 'supported living' setting, so that they can live as independently as possible. People's care and housing are provided under separate contractual agreements. CQC does not regulate premises used for supported living; this inspection looked at people's personal care and support.

#### Registered Manager

This provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations.

At the time of our inspection there was a registered manager in post.

#### Notice of inspection

We gave the service 24 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 and people are often out

and we wanted to be sure there would be people at home to speak with us.

Inspection activity started on 19 October 2023 and ended on 24 October 2023. We visited the location's office/service on 19 and 20 October 2023.

What we did before the inspection

The provider was not asked to complete a Provider Information Return (PIR) prior to this inspection. A PIR is information providers send us to give some key information about the service, what the service does well and improvements they plan to make.

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority and professionals who work with the service. We used all this information to plan our inspection.

During the inspection

We spoke with 2 people and 7 relatives. We spoke with 13 members of staff including 3 of the providers (2 of whom were also the registered manager and the supported living service manager) and care support workers.

We reviewed a range of records. This included 5 people's care records and 2 people's medication records. We looked at 4 staff files in relation to recruitment and staff supervision. Records relating to the management of the service, including policies and procedures were reviewed.

# Is the service safe?

## Our findings

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

This is the first inspection of this newly registered service. This key question has been rated good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People told us they felt safe with the support they received from Arreta Care. One person said, "It is so homely here in the [supported living] house. It's the staff, they make me feel safe."
- Information about safeguarding was shared with people across the service so where possible, people were encouraged to understand safeguarding processes and how to raise concerns.
- Staff understood their safeguarding responsibilities and knew how and where to report safeguarding concerns.

Assessing risk, safety monitoring and management

- People's risks were managed safely.
- Care records were detailed and guided staff to support people in a safe way.
- Staff knew people's needs well and were able to tell us about actions they took to keep people safe from avoidable harm.

Staffing and recruitment

- There were enough staff to support people and meet their needs.
- The provider used a dependency tool to assess and monitor staff ratios and employed a stable workforce. Staff knowledge, skills and experience were considered to ensure staff were able to support people with differing needs in the most effective way. A staff member said, "Due to a strong lead management team staff continuity is second to none."
- Staff were recruited safely and were subject to pre-employment checks such as the Disclosure and Barring Service (DBS). 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

- Medicines were administered in a safe way.
- People were given support to understand what their medicines were for and were encouraged to self-administer or have and maintain an element of control over their medicines. One person told us, "I have the key to my medicine box; I like this as it makes me feel independent. The staff must ask me if I am ready for my medicines and then they ask for the key with my consent."
- The provider was supporting people in line with STOMP (Stopping The Over Medication of People) guidance to ensure people with a learning disability and/or autism were prescribed the right medicines for the shortest time possible.
- Staff received training to ensure they were competent to administer medicines. One staff member said,

"My medication training was thorough, and it was enough, and we have competency checks that are watched as we administer medicines."

#### Preventing and controlling infection

- We were assured that the provider was supporting people living at the service to minimise the spread of infection.
- We were assured that the provider was using PPE effectively and safely.
- We were assured that the provider was responding effectively to risks and signs of infection.
- We were assured that the provider's infection prevention and control policy was up to date.

#### Learning lessons when things go wrong

- There were systems in place to measure the effectiveness, quality and safety of the services provided. When shortfalls were identified, actions were taken to improve practices and prevent the chance of reoccurrence.



# Is the service effective?

## Our findings

Effective – this means we looked for evidence that people's care, treatment and support achieved good outcomes and promoted a good quality of life, based on best available evidence.

This is the first inspection for this newly registered service. This key question has been rated good. This meant people's outcomes were consistently good, and people's feedback confirmed this.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law

- People's needs were assessed before using the service to ensure people's needs could be met in the most effective way.
- Care plans reflected people's routines and preferences. Staff used the care plans to guide them to provide the most appropriate care and support for people.

Staff support: induction, training, skills and experience

- People and their relatives felt staff were well trained. One person told us, "Staff are well trained. They help me to use my equipment and they do it safely." A relative said, "Yes, staff are knowledgeable and well trained."
- Staff told us the training provided gave them the skills and knowledge required to care for people. A staff member said, "My induction was thorough of my job role and information provided about the company policies and procedures and all information that I needed to work for them." Another staff member told us, "Online safeguarding training was part of our initial training prior to starting work. This course is refreshed annually to maintain staff knowledge. It helps to refresh and update knowledge I already have."
- Staff worked well together as a team to provide effective care. Some comments we received from staff included, "Everyone is treated the same. We are a good team", "The atmosphere is great" and "We all get on and work well as a team."

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

- People received support to ensure their dietary requirements were met across all aspects of the service.
- Advice and guidance from specific professionals was sought where necessary and records showed people were monitored through the use of food and fluid charts as needed. People were offered choices at mealtimes and specific and modified diets were catered for.
- Staff had a good knowledge of people's nutritional needs and dietary choices. Staff told us how they supported people who were diabetic or who required a modified diet.

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

- People had access to health care as and when needed and were supported to maintain their health and well-being.
- Health professionals had been consulted to ensure people were supported in the most appropriate way. These included community learning disability nurses and district nurses, occupational therapists and speech and language therapists.

- Some people, where appropriate had hospital passports in place. A hospital passport is a communication document used by people with learning disabilities to help healthcare professionals understand about people's health needs and other important information about the person.

Ensuring consent to care and treatment in line with law and guidance

The Mental Capacity Act 2005 (MCA) provides a legal framework for making particular decisions on behalf of people who may lack the mental capacity to do so for themselves. The MCA requires that, as far as possible, people make their own decisions and are helped to do so when needed. When they lack mental capacity to take particular decisions, any made on their behalf must be in their best interests and as least restrictive as possible.

People can only be deprived of their liberty to receive care and treatment when this is in their best interests and legally authorised under the MCA. When people receive care and treatment in their own homes an application must be made to the Court of Protection for them to authorise people to be deprived of their liberty.

We checked whether the service was working within the principles of the MCA, whether appropriate legal authorisations were in place when needed to deprive a person of their liberty, and whether any conditions relating to those authorisations were being met.

- Mental capacity assessments were completed in line with the MCA.
- Staff described how they supported people to ensure they were given choice and encouraged to make decisions about their care. A staff member said, "People are supported to make decisions in line with MCA, empowering people to make their own decisions where possible."

# Is the service caring?

## Our findings

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

This is the first inspection for this newly registered service. This key question has been rated good. This meant people were supported and treated with dignity and respect; and involved as partners in their care.

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

- People received care from staff who treated people with kindness and compassion.
- Feedback we received reflected good, quality care. Comments included, "The care is good, and I like the carers. They are supportive- I talk to them and they listen", "The care is brilliant and faultless. This is how it should be everywhere" and, "My [Relative] is happy and I can see development and maturity, and this is because of where they are."
- People were supported to have any diverse needs met and the registered manager considered people's protected characteristics under the Equality Act 2010. The registered manager said, "We ask these questions as early as pre-assessment of people who we support. We have worked with professionals to support people to explore protected characteristics and what this means to and for them."

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

- People and their relatives were consulted about their care needs.
- Mechanisms were in place to allow people to contribute and feedback about the care they received. One person told us, "The best thing about my care is I get to make my own choices and I like that!"
- Staff developed good relationships with people, their relatives and advocates to enable them to provide person centred care.

Respecting and promoting people's privacy, dignity and independence

- People received care and support in a way which promoted their dignity and privacy. One person said, "They [Staff] treat me well and respect my privacy. When I have help with personal care, I am always covered with a towel."
- Staff told us how they upheld people's dignity and privacy. One staff member told us, "I ensure people always have dignity by giving them space, making sure they have privacy when needed and respecting them in all aspects of their daily life and I treat anyone like I would want to be treated."
- Independence was promoted, and people were encouraged to help themselves wherever possible. One person told us, "I am trying to develop my independent living skills and the staff are very proactive in supporting me with this." A relative said, "My [Relative's] support gives them the freedom and confidence that they have needed to achieve their full potential."

# 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; 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

- Care was person-centred and care records documented people's life histories, likes and dislikes.
- People and their relatives felt that care was tailored to individual needs. Staff told us about individuals and the care they provided in line with people's wishes.
- Where required, people were able to pursue hobbies and interests with the support and assistance of staff. One person said, "I have a plan and I am asked whether I want to stick to it each day. Staff know me well and support me to manage this."
- People were encouraged to develop and maintain meaningful relationships. A relative said, "I have become 'Mum' again and I know there are staff who will care and love my [Relative's name]. Another relative said, "Our [Relative] came home for Christmas and after a couple of days told us they wanted to go 'home'. This was not sad but wonderful for us to hear."

### Meeting people's communication needs

Since 2016 all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard. The Accessible Information Standard tells organisations what they have to do to help ensure people with a disability or sensory loss, and in some circumstances, their carers, get information in a way they can understand it. It also says that people should get the support they need in relation to communication.

- The registered manager was aware of their obligations in meeting the AIS and shared with us examples of how they ensured people were supported with accessible information.
- Relatives also felt the support given to people to enhance communication was good. A relative said, "Our relative requires additional communication support but they have a strong will, and they can speak with their actions; a look is enough to let someone know to give them some privacy and staff do, we have seen this."

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

- There was a complaints policy in place, and we saw how complaints had been dealt with in line with the provider's policy.
- People and relatives told us they had either received literature about making a complaint or they knew who to speak with in the event of needing to make a complaint.

### End of life care and support

- At the time of the inspection, no one was receiving end of life care. The registered manager had begun to further develop end of life care plans.

# Is the service well-led?

## Our findings

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

This is the first inspection for this newly registered service. This key question has been rated good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

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

- The providers and management teams worked together to adopt an open culture across the service and led by example. Staff spoke highly of the management team describing them as helpful and approachable. One staff member said, "The managers are good. They are very approachable and very caring and very passionate to both staff and clients, and nothing is too much trouble. They have always supported me inside and outside of work." Another staff member told us, "We can approach the management with any issues that we have. We all get on and work well as a team. It is a good company to work for and get appreciated for what we do by all management."
- The registered managers told us how they worked alongside staff to ensure the values of the service were embedded in staff practice. They said, "We all work alongside the staff, initially by mentoring the new starters. Every new call we take on, we start the call and then staff are shadowed by the managers so we can lead by example, setting standards of good practice so this followed on by all staff."

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

- Staff had defined duties and roles. There was a scheme of delegation in place amongst management and staff to share accountability and responsibility.
- Quality and safety were of a high priority and regular audits took place to assess and manage the effectiveness of the service.
- The registered manager understood their registration and regulatory responsibilities. For example, notifications of key events, such as death and safeguarding concerns were notified to us, as required by law.
- The registered manager used different initiatives to develop their knowledge and practice such as attending forums for registered managers.
- The provider and management team were committed to continually improving the service. The registered manager shared examples of practice where outcomes had been positive for people. They told us, "We always work towards positive outcomes for people and try to find ways to improve people's lives. We always try and see the person and improve their quality of life to the best it can be."

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 understood the need to respond under the duty of candour if something had gone wrong. Where there had been requirements for the registered manager to do so, this had been done in

line with the provider's policy and in line with best practice. The registered manager said, "We need to be open, honest, and transparent if something goes wrong. If it is our mistake, we apologise."

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

- People were actively involved with running of the service. People and their relatives were encouraged to make suggestions about the service and to feedback through meetings, reviews and through completion of questionnaires and surveys. One person said, "Once a month we have a house meeting, and we also have a suggestion box where we can make comments and suggestions." A response from a survey we read stated, "The managers have been excellent. The whole company have gone above and beyond what I expected and are always available when I require assistance."
- Relatives told us they were consulted, and we received comments such as, "The whole team are amazing. I can call anytime, any day and the phone will be answered" and, "Communication is key and all knowledge good or bad is shared so that my [relative] gets the best care possible."
- Staff received regular supervisions with management to discuss thoughts and ideas as well as their practice and development. Team meetings were also held as an opportunity for staff to come together in a group forum. A staff member said, "The provider is always willing to help with any problems and we can discuss issues at our meetings. We are all treated fairly and have surveys and can voice our opinions."

Working in partnership with others

- The management team worked with different organisations, agencies and professionals to ensure people received a good standard of care.
- Some people accessed paid work, volunteering and social opportunities and were active members of their community.