			
<b>Registered Location &amp; Address:</b>	Visiting Angels Manchester East, Prospect House, Featherstall Road, Oldham OL9 6HT		
<b>Registered Provider Name:</b>	Roxhsana Ltd	<b>Registered Manager Name:</b>	Badar Usmani
<b>Dates of Site Visit &amp; Report Writing:</b>	21 <sup>st</sup> & 22 <sup>nd</sup> May 2024	<b>Nominated Individual Name:</b>	Roxie Taj
<b>Verbal Feedback Given to &amp; Date of Feedback:</b>	Roxie, Badar & Jodie	<b>Date Report Shared:</b>	28 <sup>th</sup> May 2024

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**Potential Rating & Scoring Framework Outcome;**

Overall rating judgment by Kata Care ☆	<b>Outstanding</b>
Are services at this location Safe ●	<b>Good</b>
Are services at this location Effective ●	<b>Good</b>
Are services at this location Caring ☆	<b>Outstanding</b>
Are services at this location Responsive ●	<b>Good</b>
Are services at this location Well-led ☆	<b>Outstanding</b>

<b>CQC Percentages</b>	<b>CQC Scoring Card</b>	<b>CQC Domains</b>	<b>Outcome Percentages</b>
Over 87%	Outstanding	Safe	<b>70%</b>
63% to 87%	Good	Effective	<b>75%</b>
39% to 62%	Requires Improvement	Caring	<b>100%</b>
25% to 38%	Inadequate	Responsive	<b>81.25%</b>
0% to 25%	Enforcement Action & Breaches	Well-Led	<b>91%</b>

The above is based on the scoring available from CQC website and the auditors' site visit. However, the accuracy of the ratings cannot be guaranteed. The scoring is based on quality statements these are the commitments that providers, should live up to.

Kata Care assesses and makes a judgment on the care provision against the five CQC key questions of Safe, Effective, Caring, Responsive, and Well-led. In line with the potential scoring framework.

We also consider the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 (Part 3) and the Care Quality Commission (Registration) Regulations 2009 (Part 4) as these are the regulations that providers must meet in order to maintain their registration.

### **Introduction to the Service, Methodology & Evidence Gathered;**

Kata Care was commissioned by Visiting Angels Manchester East to carry out a quality review and mock inspection for their domiciliary care service.

The CQC's website currently states " *This service was registered by CQC on the 19th July 2022. New services are assessed to check they are likely to be safe, effective, caring, responsive, and well-led. These assessments can include; site visits, criminal record checks, interviews with key managers, detailed review of how the service will be run.*

*Follow-up inspections of new services are undertaken regularly following registration."*

Specialisms / services, personal care, caring for adults over 65 yrs, caring for adults under 65 yrs, dementia, physical disabilities and sensory impairments.

Not everyone who used the service received personal care, there were 7 people receiving regulated care. Kata Care and CQC only inspects where people received personal care. This is to help with tasks related to personal hygiene and eating, where they do, we also considered any wider social care provided.

There was a Registered Manager in place. A Registered Manager is a person who is registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated regulations about how the service is run. There is a care coordinator in place who is progressing as part of succession planning into the role of registration with CQC.

This site visit was announced to the service at the request of the provider. This report will not identify any persons. Kata Care aims to reduce the risk of any personal identifiers when describing examples of any findings.

The auditor used the following methodology and sources of evidence to make their judgment:

- ✚ Kata Care scoring framework in line with CQCs sector guidelines.
- ✚ A review of the environment internally and externally. Including but not limited to records, risk assessments and legal checks / testing such as gas and fire.
- ✚ A review of service records including and not limited to deployment of staff, staff training, staff recruitment and care records.
- ✚ Discussions with people who live in the service, staff and visitors.
- ✚ Observations of staff interactions with people and visitors.
- ✚ A review of systems and processes to determine and develop quality including records not limited to: Policies, procedures, guidance, investigations, auditing, and governance systems.

#### **Brief Summary of Service Strengths Including Areas of Best Practice;**

- ✓ We found many examples where staff had gone 'above and beyond' in their role to support people through truly exceptional circumstances. Staff had supported people to have positive outcomes following difficult events in their lives. Staff had also supported a person at home in accordance with their wishes at the end of their life. Staff offered flexibility to the hours of support required and also offered consistency.
- ✓ People told us they were treated exceptionally well, and staff consistently ensured their privacy and dignity was respected. People described being offered choice in all areas of their support and told us staff promoted their independence wherever possible.
- ✓ People said they never felt rushed, and staff had ample time to complete all tasks as well as taking time for conversation which people valued.
- ✓ One person couldn't speak highly enough about both of the business owners. They mentioned how they felt part of an extended family and in their most difficult times could not have asked for more, "they truly are Angels".

- ✓ Staffing levels were enough to meet people's needs and staff were safely recruited. All staff had completed an induction and carried out shadow shifts prior to loan working. Staff told us they received training and felt confident in their roles.
- ✓ Staff felt exceptionally well supported by the management team and gave lovely examples of being offered gifts as a thank you, these gifts were personalised. The office supplied cold drinks, fresh fruit and snacks and staff commented that this wasn't just in the summer months but also in the winter months.
- ✓ People were protected from the risk of abuse. Safeguarding policies and procedures were in place. Staff had received training and understood how to keep people safe and who to report it to if they had any concerns
- ✓ The provider carried out robust audits and had quality assurance systems in place. These also included analysis and spot checks that were used to drive improvements.
- ✓ There was a complaints policy and procedure in place that people and their relatives were aware of. People told us they felt confident to raise any concerns and complaints they had.
- ✓ We received many, many compliments about the service, staff and the management team. The providers could not have been more visible to both staff and the people they support.

#### **Brief Summary of Concerns, Areas for Development and Recommendations to Drive Improvements;**

- ❖ No concerns were identified during the mock inspection, there are recommendations within the actions to drive improvements in the latter part of the report.

*There are more details within the main body of this report in the relevant sections and added actions to the advised actions at the end of this report.*

## Main Findings for each Key Question;

### SAFE

**Rating: Good**

**Safety is a priority for everyone and leaders embed a culture of openness and collaboration. People are always safe and protected from bullying, harassment, avoidable harm, neglect, abuse and discrimination. Their liberty is protected where this is in their best interests and in line with legislation.**

**Where people raise concerns about safety and ideas to improve, the primary response is to learn and improve continuously. There is strong awareness of the areas with the greatest safety risks. Solutions to risks are developed collaboratively. Services are planned and organised with people and communities in a way that improves their safety across their care journeys. People are supported to make choices that balance risks of harm with positive choices about their lives. Leaders ensure there are enough skilled people to deliver safe care that promotes choice, control and individual wellbeing.**

This service scored 70 (out of 100) for this area.

Find out [what we look at when we assess this area](#) and [How we calculate these scores](#).

### Quality Statements- known as we statements.

#### Learning Culture

- The provider prioritises training and the Registered Manager delivers on this for the wider staff team. They ensure that all our staff undergo regular training and professional development to stay updated with the latest best practices in domiciliary care.
- The Registered Manager and care coordinator provide access to various training resources, including online courses, workshops, and seminars, to support their team's continuous learning. It is clear that the Registered Managers enjoys delivering the training and this is exceptionally robust.

- During day 1 of the mock inspection it was clear that all of the Head Office team offer supportive measures where there may be challenges. For example, a staff member is fluent in Punjabi and is learning the English language, both business owners offered additional support with e-learning and enrolled a 'buddy' in the form of a fellow Punjabi colleague to effectively support with good outcomes.
- Observations saw that the team encouraged open communication and feedback among staff to identify learning opportunities and areas for improvement. Where barriers were identified there was evidence to show that discussions had been held and supportive measures were in place. This was not just directly with the staff team but also an extension of support to the people being supported.
- Head office has clearly been set up to create a safe space for staff to share experiences, challenges and successes for peer-to-peer learning and support.
- The Registered Manager actively reflects on best practice, this can be observed through staff meetings, conducting regular team meetings and reflective practice sessions to discuss care experiences, identifying lessons learned whilst implementing improvements. In addition this could be evidenced through robust documentation and recorded minutes of meetings.
- Succession planning was in place as a care coordinator had been appointed and would be starting their Level 5 in Leadership and Management. The providers invest in leadership and development and provide training and mentoring programs to cultivate future leaders within the business.
- The auditor observed that the management team models a commitment to learning and development, setting a positive example for all staff.
- During day 1 of the mock inspection there was a clear commitment to driving improvements and lessons learnt. The Registered Manager and care coordinator conducts regular audits and quality checks to ensure compliance with standards and identifying opportunities for learning and improvement.

Regulation match 12,16,17, 20.

### **I Statements**

- I honestly can't fault them; they all know what they are doing.
- I had lots of training when I first started here and I continue to do so.

Score: 3

Rating: Good

Evidence: the service can demonstrate it's commitment to a learning culture, which is essential for delivering high-quality, person-centered care.

### **Safe Systems, Pathways & Transitions**

- The Registered Manager has risk assessments for each person supported to identify potential hazards and implement appropriate measures to mitigate avoidable harm. As an example the auditor was able to observe that a choke risk had been identified and this meant that the risk had been assessed. The auditor reiterated the importance of the risks being revisited as a maximum annually for best practice and closer monitoring.
- We could observe reviews and updates in relation to risk assessments reflected any changes in the person's condition and / or environment. However, there could be tighter processes in place. For example, a person supported had been under the SALT team and had been prescribed supplements, since the review these had been omitted due to contra indications. It wasn't clear if the SALT team had been informed and the Registered Manager didn't have the guidance from the SALT report to reference against this for best practice.
- The Registered Manager has established clear safety protocols and procedures that all staff are trained to follow to ensure the safety of individuals and care staff. For example all staff are proficient in using personal protective equipment (PPE) and adhering to infection control measures.
- The auditor reviewed approximately 5 eMAR records and identified that there were stringent procedures in place for the safe administration, storage and



documentation of medications. Where gaps were observed the auditor could see robust auditing and internal investigations had been carried out.

- The provider offers ongoing training to staff on medication management to prevent errors and ensure compliance with regulations, there are effective communication channels for reporting safety concerns and incidents promptly.
- Regular audits of safety systems and practices to identify areas for improvement and ensure compliance with regulatory standards are carried out, the team use the findings from these audits to make necessary adjustments and improve their safety protocols.
- The team promote a positive culture and this is embedded across to individuals supported and the wider teams. People and families are involved in the safety element of the pre assessment and care planning, this can be referenced within the support plans.
- Person centred care is monitored and managed effectively through the use of technology such as electronic care planning. This also aids as a monitoring device in terms of 'People Planner', calls can be audited and missed and / or late calls can be identified.

Regulation match 12, 17. (consider regulation 9)

### **I Statements**

- Seamless and smooth is what Visiting Angels is.
- I am overall happy with the transition from hospital and using the service.
- I find the paperwork is endless, [person's name] cannot cope with it and therefore has in the past refused to sign.

Score: 2

Rating: Requires Improvement

Evidence: the service can demonstrate it's commitment to maintaining safe systems and providing a secure environment for both staff and people they support.

### **Safeguarding**

- People and relatives said they felt safe with the care staff who knew them well.
- It was clear to see that the management team were aware of when and how to raise concerns with the local authority. Although there were no referrals made the auditor was confident that the team were competent in raising concerns if a safeguarding referral was required.
- Staff had been trained and understood the importance of raising concerns or suspicions they had. Staff followed the provider's policy and procedure and had access to a confidential whistleblowing number should they wish to raise concerns anonymously.
- People were protected from the risk of abuse and commented that they felt safe using the service.

Regulation match 10,12,13. (consider regulations 9, 11,17, 20)

### **I statements**

- I feel safe with them, the carer does their job.
- I do feel that [person's name] is safe with them, they listen, chat and laugh.

Score: 3

Rating: Good

Evidence: this meant the auditor observed staff took care of people well and people were trained to identify differentiating forms of abuse.

### **Involving People to Manage Risks**

- Potential risks posed to people had been assessed, monitored and recorded. Risk assessments were linked to care plans and detailed the support required from staff to reduce the risk of avoidable harm. For example, risks relating to mobility, medicines support and keeping the person's skin healthy. A spouse said, "they watch him carefully when walking as he can be a bit wobbly".

- People's home environments had been assessed for potential risks such as, potential trip hazards. People and relatives told us that at the start of the service a member of the management team completed an assessment of their living area and any external risks such as lighting or uneven surfaces.
- A record was kept of any equipment people used. Although no one was currently supported by the use of a hoist for transferring, the team communicated that they would ensure it had been serviced and was in good working order.

Regulation match 9,11,12. (consider regulation 10).

### **I Statements**

- I employed the carers and they look after my mother-in-law very well and take care of all her needs and keep her happy and safe.
- I feel safe when I move or go out with my carers, there is a plan for what happens next and who will do what, having all the practical arrangements in place.
- I have considerate and caring support from competent carers.

Score: 3

Rating: Good

Evidence: this meant the auditor saw that people were involved in managing risks and were encouraged to step out of their 'comfort zone'.

### **Safe Environments**

- We did not look at Safe Environments during this assessment. The score for this quality statement is not applicable and will not be scored due to the service having not been inspected by CQC.

Regulation match 12,15,17.

Score: N/A

### **Safe and Effective Staffing**

- The auditor observed three staff files all of which had satisfactory references, DBS checks and all ID documentation which were all up to date. There is evidence of regular internal audits of staff files. All staff files observed evidenced satisfactory completion of the care certificate and various and ongoing wider training including, safeguarding, medication management and moving and handling.
- We observed evidence of regular supervisions, support and teams meeting. The auditor observed safe staffing levels ensuring support provided is safe and effective.
- The auditor spoke with two staff members who both said they felt supported by management in their workload enabling them to have a work life balance which can be built upon in the future to suit their changing needs. Managing workloads to avoid burnout to ensure the delivery of high-quality care. Management have created a calm relaxing space for staff to utilise when needed for study time, time out and prayers.
- The provider ensures that 3 references are collated for new starters. The Visiting Angels policy advises 4, however, this is significantly high in line with other healthcare providers.
- Lone working risk assessments were in place for staff recruited and these were signed and dated, this is critical within domiciliary services as most staff are lone workers.
- A recommendation would be for all declarations to be signed and dated for all staff with a countersignature and date from the person this has been checked by.
- Visiting Angels have a document that asks the staff what their likes and dislikes are. For example, chocolate, alcohol and / or a voucher.
- Recruitment is robust by the providers. For example, we observed one staff file where appropriate risk assessments were in place along with ongoing supervision and reviews to ensure safe and effective practices.were maintained [the auditor will omit further information from the report due to GDPR]. Both business owners who

are passionate individual's gave the person a chance and they have become one of the best carers.

Regulation match 12,18,19

### **I Statements**

- I have never felt so appreciated in all my life.
- They are so supportive; I can work the hours I need and still be able to look after my children.
- I know I work for a very safe, professional, and understanding company; nothing is too much trouble.
- I always feel heard by the management team.

Score: 3

Rating: Good

Evidence: the provider can demonstrate its commitment to safe and effective staffing, which is crucial for delivering high-quality care and maintaining satisfaction for people supported.

### **Infection Prevention and Control**

- We did not look at Infection Control during this assessment. The score for this quality statement is not applicable and will not be scored due to the service having not been inspected by CQC.

Regulation match 12,15. (consider regulation 17).

Score: N/A

### **Medicines Optimisation**

- People received their medicines safely from trained staff whose competency had been assessed by a member of the management team. Staff followed specific guidance in relation to each person's support required with their medicines.
- People's medicine administration records were audited by a member of the management team on a regular basis. Staff were observed through spot checks

when administering peoples medicines to make sure they were following best practice.

- As a recommendation the auditor advised and encouraged the team to document where a person supported is prescribed a flammable cream / ointment, a sample support plan was written up and emailed to the provider.
- People told us staff administered their medicines on time and appropriately; completing the appropriate paperwork electronically. One relative told us through a telephone conversation that their loved ones medicine was time specific and that the care staff were aware of this and ensured the medicine was given on time.
- A person supported is prescribed Nitrofurantoin which is an antibiotic. Is this prescribed on a maintenance dosage or is this no longer prescribed. Clarification and clearer information is required for this aspect. Discussed during feedback and the Registered Manager was following this up.
- There was an incident for a person whereby there were 3 separate occasions of medicines being missed. The auditor triangulated the information and could see that the medicines errors had been investigated by the Registered Manager, they had clarified that the medicines had been administered and family had confirmed this. We could observe that conversations had be held with the staff members to reiterate the importance of signing on the eMAR.
- Topical MAR charts were in place and completed well, body maps were also in place for best practice.
- The provider has medication management policies in place that align with regulatory standards to ensure safe and effective handling of medicines.
- The team encourage feedback from people, families and staff regarding their medication management practices and use this information to make continuous improvements.

Regulation match 9, 12. (consider regulation 11).

### I Statements

- I feel supported with my medicines.
- I don't need help with any medicines, I don't have to take anything as yet.

Score: 3

Rating: Good

Evidence: this meant the provider could show a commitment to the safe management of medicines, reflecting the positive findings from the auditor.

### EFFECTIVE

Rating: Good

**People and communities have the best possible outcomes because their needs are assessed. Their care, support and treatment reflects these needs and any protected equality characteristics. Services work in harmony with people at the centre of their care. Leaders instil a culture of improvement. Where understanding current outcomes and exploring best practice is part of everyday work.**

**Everyone is supported to see what works well and not so well based on indicators of quality. Continuous improvement is always guided by this insight.**

This service scored 75 (out of 100) for this area.

Find out [what we look at when we assess this area](#) and [How we calculate these scores](#).

### Quality Statements – We statements

#### Assessing Needs

- People's needs were assessed with them, their relatives and a member of the management team prior to receiving any care from the service. This was to ensure their needs could be met by the care staff.

- The team carry out very thorough pre-support assessments and it is reassuring to see that people supported are weighed prior to the care commencing, monitoring people's health status closely.
- Assessments were detailed and included both people's needs and their preferences. One person commented "the agency asked what was important to me and this was reflected in my care plan. For example, my interests in watching television and having my hair styled".
- Needs have been assessed by the provider and risk assessments have been embedded well.
- Peoples assessments included characteristics covered by the Equality Act (2010) such as religious and cultural needs, expressing sexuality and emotional support. This information was transferred to the care plan which outlined the support required from staff. People were treated as individuals with their needs and wishes were respected by staff.
- As a recommendation the auditor would advise that when a person supported does not self-administer their medicines then there is no requirement to complete the assessment document.
- Risk assessment plan, identification and controls document needs to be archived as the information places the person at risk of avoidable harm as the information is contradictory. This was discussed during feedback and actioned on day 1 of the mock inspection.
- There was good use of the full care plan review document being utilised by the Registered Manager rather than the usual theme of utilising the pre assessment form for all recordings.

Regulation match 9, 12. (consider regulations 10,11, 17).



### **I Statements**

- I had a full assessment I think, well it was very thorough and they came to my house.
- I have staff that come every few weeks to check everything is okay, they also ask if anything had changed.
- They asked lots of questions about my health and well-being, I had my daughter with me which was useful.
- I think reviews take place every six months.

Score: 3

Rating: Good

Evidence: this meant the auditor observed that assessments had been carried out well, involving all people supported and plans being individualised for best practice.

### **Delivering Evidence-Based Care and Treatment**

- People's health needs were identified in the initial assessment. Staff worked alongside and followed guidance from healthcare professionals to improve people's health, mobility and well-being. For example, guidance from an occupational therapist detailing how to support a person when They were mobilising.
- People said staff looked after their health and contacted relevant healthcare professionals to ensure they remained as healthy as possible. One person told us staff arranged for them to attend the hospital for an appointment when they needed to. Relatives said they were kept informed if their loved one was unwell or not their usual self.
- As per the assessed need 'quality statement' we could observe that people's needs were assessed in relation to the support they required from staff to maintain their nutrition and hydration. Care plans contained detailed guidance of the support people required with their meals. Some people required jugs of drinks to be left within their reach at the end of their call. Other people required staff to prepare

breakfast, lunch and dinner of their choice. People throughout told us this happened.

- The Registered Manager keeps up-to-date with current research as a clinician themselves and subscribes to reputable medical journals and organises regular training sessions where recent studies may have more informative information to best support care practices, and their implications for care are discussed.
- The Registered Manager regularly assesses the effectiveness of their care practices and makes adjustments based on evidence to continually improve their services. For example, monitoring individuals health outcomes and satisfaction levels to evaluate the effectiveness of care plans and making data-driven adjustments as needed.
- The team work closely with healthcare providers, including doctors, nurses and specialists, to ensure that care practices are aligned with current medical standards. As an example the auditor could observe that staff had been consulting with a dietitian to develop evidence-based nutritional plans for clients with diabetes, ensuring their dietary needs are met according to the latest guidelines. The auditor will support in writing a preferred plan as requested, incorporating where staff may need to seek medical assistance.
- Both business owners utilise electronic health records within the care plans and therefore incorporate technology and digital tools that are backed by evidence to improve the quality and efficiency of their care. This oversight tracks an individual's progress and ensures accurate, up-to-date information is available to all carers involved in a person's care.

Regulation match 9, 10,12, 14,17 (consider regulation 11).

### **I Statements**

- I use the feedback from those I support, to continuously improve the quality and effectiveness of the service I deliver.
- I would recommend these carers to anyone requiring homecare, they have been caring professionals and have greatly contributed to my wife's recovery.

- I was very pleased with the quick response by Visiting Angels Manchester East, and then by their continuing contact thereafter.

Score: 3

Rating: Good

Evidence: the provider demonstrates its commitment to delivering evidence-based care and treatment, ensuring people receive the highest standard of care supported by the latest research and best practices.

### **How Staff, Teams and Services Work Together**

- The Registered Manager ensures transparent and regular communication among all team members, aiming for a cohesive working environment. For example, holding team meetings where carers, support staff, and managers can share updates and discuss challenges.
- The wider team, including carers participate in decision-making processes to contribute their insights and experiences. As an example holding multidisciplinary team meetings to develop and review people's care plans, the new care coordinator will develop this well and confidently moving forwards.
- The Registered Manager and care coordinator offers regular supervision and support to staff, ensuring they feel valued and equipped to provide high-quality standards of care.
- We observed that the team uses communication tools and platforms that facilitate seamless information sharing among team members. For example, using a secure messaging app for instant communication between carers and managers.
- The provider creates an inclusive workplace where all team members are respected and their contributions are valued. As an example the Registered Manager regularly seeks feedback from staff and uses it to make improvements in care practices and organizational processes.

- The provider celebrates the achievements and contributions of staff, recognizing their hard work and dedication. Hosting recognition events to acknowledge outstanding team members and graduations.
- It was clear that the team promotes a healthy work-life balance by respecting personal time and offering flexible working arrangements. Staff told us they saw that Head Office implemented flexible scheduling options and provided resources for well-being management.

Regulation match 9,12, (consider regulation 17).

### **I Statements**

- I have been given training as well as being introduced to my client with the managers present which made me feel very valued and empowered as a care worker.
- I am always introduced to people in person by management which is a big support as I then feel accepted and trusted by the client.
- [person's name] makes every effort to make sure [person's name] continues to enjoy all the things they loved doing before they got Dementia / Alzheimer's. Also, with their other health issues this was a gradual journey and we have a long way to go with making sure they continue to enjoy their daily life regardless of their personal challenges.

Score: 3

Rating: Good

Evidence: By clearly defining the roles of the provider, the Registered Manager, and the wider team, these statements highlight how each contributes to a well-functioning, collaborative, and supportive working environment in a domiciliary care service.

### **Supporting People to Live Healthier Lives**

- The wider team actively encourages the people they support to participate in regular physical activities tailored to their abilities and interests. For example, organising daily walks and doing arm chair exercises as part of their care package.
- The wider team supports people in maintaining social connections and engaging in community activities to enhance their mental and emotional health. The Nominated Individual mentioned the potential of facilitating group activities, such as book clubs or craft sessions, to help individuals build social connections and prevent social isolation.
- The Registered Manager ensures that all of the people supported undergo regular health checks to monitor their progress and adjust care plans as needed. Scheduling regular weight, blood pressure, and mood assessments to track health improvements and adjust interventions where appropriate.
- We could observe that the providers create and follows personalised care plans that address the unique health needs and goals of each client. Some goals could be improved upon and these have been written for the teams as examples for best practice and emailed across.
- The Registered Manager integrates mental health strategies into everyday care practices to ensure holistic support for all individuals. As an example they train staff on recognising signs of mental distress and providing immediate support and appropriate referrals.
- The wider team promotes a positive and uplifting environment that encourages individuals to adopt and maintain healthy habits. It was observed through documentation that staff created a welcoming and motivating atmosphere with positive reinforcement, upbeat interactions and supportive relationships. This was also reiterated by both staff and people via conversations on day 2.

Regulation match 9,12, (consider regulations 10,11).

### **I Statements**

- I eat much healthier nowadays.
- I have a carer that prepares my meals, I enjoy different foods.
- I don't have as much medication as I used to have, I am more active now.

Score: 3

Rating: Good

Evidence: the auditor could evidence a commitment to supporting people in living healthier lives, improving mental health, achieving weight loss in a positive manner, and enhancing overall mood and well-being.

### **Monitoring and Improving Outcomes**

- People said that staff regularly met with them to review their care and support needs and gain their feedback on the service.
- The Registered Manager had several systems in place to help monitor outcomes for people. This included asking people for their feedback through meetings and telephone calls and the completion of surveys on their experience.
- The provider had systems in place to monitor outcomes for people and used this information to develop the service. For example, they monitored call times and the numbers of carers involved in people's care. From this information they had developed targets outlining how many members of staff should be involved in a single package of care.
- From surveys the Registered Manager and care coordinator looked at themes and trends to see where improvements were needed and could be made.

Regulation match 12, 17 (consider regulation 9).

## I Statements

- I know my carers look after me well and will contact my GP or encourage me to do this if my health deteriorates.
- I receive surveys from the owners which I think is to check I am happy with everything.
- I am always asked for feedback and feel confident that I can raise any concerns where needed.

Score: 3

Rating: Good

Evidence: outcomes are measured well and analysis and trends are regularly reviewed.

## Consent to Care and Treatment

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 assisted to do so when needed. When they lack mental capacity to make a safe and informed decision 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 so that they can receive care and treatment when this is in their best interest and legally authorised under the Mental Capacity Act 2005. The application procedures for this in care homes and hospitals are called "Deprivation of Liberty Safeguards (DoLS)". The auditor checked that the service was working within the principles of the MCA and whether any conditions on authorisations to deprive a person of their liberty were being met. [Mental Capacity Act and Deprivation of Liberty Safeguards - Care Quality Commission \(cqc.org.uk\)](https://www.cqc.org.uk/resources/guidance/publications/mental_capacity_act_and_deprivation_of_liberty_safeguards_-_care_quality_commission)

- People told us, and relatives confirmed, staff asked for consent prior to any care or support. One person said, "they ask my permission and explain what they are doing". A relative told us staff respected their loved one's choice when they refused personal care, it was recorded in their care plan to try again later during the call, this was adhered to by staff.

- Staff understood the MCA and DoLS and confirmed they had received adequate training. Staff understood that people had the right to make decisions and were supported to make what people felt maybe unwise decisions. Staff said they supported people to make daily choices such as, what they wanted to eat and wear that day.
- Although there were no records kept of directives by the Court of Protection where appointees were responsible for making decisions about a person's health, welfare or finances this wasn't a requirement at the time of inspection. The Registered Manager was aware that when necessary and at that time best interest meetings would need to be taking place involving people, their loved ones and health professionals when specific decisions had to be made.
- Consent to care and treatment was obtained by the team. As an example a person supported was very poorly and had declined in health, this meant an admission into hospital. The team had ensured that consent was gained from his Next of Kin, in their best interest.

Regulation match 11 (consider regulations 9, 10).

Score: 3

Rating: Good

Evidence: good practices could be observed in terms of the need for consent to care where applicable.



## CARING

### Rating: Outstanding

**People are always treated with kindness, empathy and compassion. They understand that they matter and that their experience of how they are treated and supported matters. Their privacy and dignity is respected.**

**Every effort is made to take their wishes into account and respect their choices, to achieve the best possible outcomes for them. This includes supporting people to live as independently as possible.**

This service scored 100 (out of 100) for this area.

Find out [what we look at when we assess this area](#) and [How we calculate these scores](#).

### Quality Statements – We statements

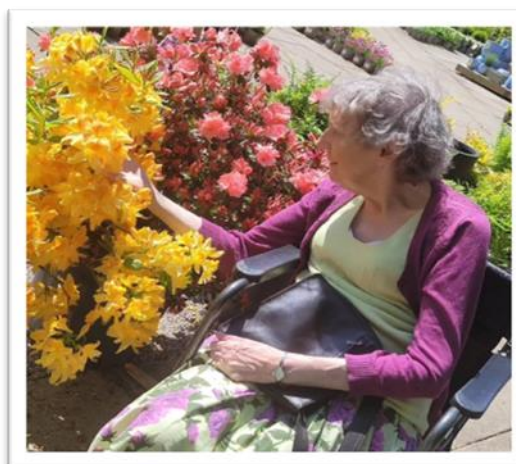
#### Kindness, Compassion and Dignity

- Staff were consistently described as kind and caring. Interaction with people showed staff knew people extremely well and there was a warmth in their relationship.
- People told us the staff always had time to chat which they really valued and said made such a difference to their lives.
- The provider and Registered Manager showed great commitment to their roles and gave many examples of where they had gone above and beyond to meet people's individual needs and wishes. They had researched a person's individual faith and shared this knowledge with the staff team. This ensured that the person living with dementia could continue to follow their faith which was pivotal to their well-being.
- Staff treated people well and people spoke exceptionally highly of the staff that supported them comments included, "all the carers are lovely, so helpful. They are also kind and caring and nothing is too much trouble".
- People's care plans included information about their life history, likes and dislikes and staff were knowledgeable about these. A relative said their loved one had an

interesting life and repeated stories of this; they said, the care staff always listen and show an interest.

- People were grateful that their carers respect and accommodate their cultural and religious practices, especially during significant times like Ramadan. One person mentioned on day 2 of the mock inspection that "their kindness and understanding make it easier for us to observe our traditions."
- The team ensure that they respect and accommodate the cultural and religious practices of the people they support. By doing so, they show kindness and adopt an environment of inclusivity and respect.

Regulation match 9,10 (consider regulation 12).



## I Statements

- I feel the level of professional from the service is phenomenal.
- I have always said that the quality of work which gets 'served' to us is beyond amazing.
- Visiting Angels Manchester East cared for our dear Dad [person's name] in the months leading up to his passing. The girls are little 'Angels' showing care and compassion always.
- My dad always spoke highly of the girls. Registered Manager and business owner were always on hand to help us and showed great care to our Dad. "Thank you all from the bottom of our hearts. Visiting Angels Manchester East is not just a care company it is a company that really cares".
- I have carers that are always at hand to make sure that I am okay and they provide me with the best possible care.

Score: 4

Rating: Outstanding

Evidence: this meant the auditor observed significant and exceptional ways that the entire team supported people. Observing an extended arm to families and loved ones, kindness and compassion were clearly visible throughout the mock inspection and feedback was outstanding.

## Treating People as Individuals

- There was a strong, visible person centred culture. The provider ensured that staff in all roles were highly motivated and offered care and support that was exceptionally compassionate and kind.
- All of the people and relatives, without exception, praised the approach of staff. One person said, "they are very trustworthy and give me confidence to carry on". Another person said, "I have carers who communicate with me and take their time, they never rush me, and they treat me with respect". A relative said, "they are

invaluable because they put my family member at ease before future visits, as well as giving the beneficial knowledge of my family members needs and surroundings”.

- Guidance and support was available for people from the LGBTQ+ community. This guidance offered support and advice for people if they did not wish to speak with a member of staff, this helped to ensure people were provided with support to lead their lives in their chosen way.
- An equality, diversity and human rights approach to supporting people's privacy and dignity was well embedded in the service. The service was particularly creative in the way it involved and worked with people to understand their diverse circumstances and individual needs.
- The actions of the staff had a direct impact on a person's confidence and help to identify a health condition. The person described the staff who helped them as, 'angels without wings'.
- The Registered Manager said "we take pride in developing personalised care plans for all the people we support, understanding their unique needs and preferences. This compassionate approach allows us to provide care that truly makes a difference."

Regulation match 9, 10, 14.

### **I Statements**

- I know they are always at hand to make sure that we are okay and provided with the best care possible.
- I feel they have gone 'above and beyond' the call of duty.

Score: 4

Rating: Outstanding

Evidence: the team treats individuals in an exceptionally personalised manner. People receive compassionate, tailored care from a consistent team of carers, with detailed care plans reflecting their unique needs and preferences. This person-centered approach exemplifies excellence in their domiciliary care provision.

### **Independence, Choice and Control**

- The Registered Manager and care coordinator discussed their focus around care plans and these being designed to be flexible, allowing individuals to choose the times and types of support they need, thus promoting their independence and control over daily routines.
- Care workers assist with activities of daily living (ADLs) while encouraging and helping individuals to perform tasks themselves as much as possible. This could include washing, dressing and / or cooking, thereby promoting self-sufficiency.
- People supported are provided with information and options regarding their care, enabling them to make informed choices. This includes choosing their care workers, types of services, and how and when these services are delivered. For example we observed that a staff member had been 'matched' with the person as per the individuals request.
- We observed that a person with a disability wanted to prepare their own meals. The care plan includes sessions where the carer helps with meal planning and preparation, providing guidance and assistance while encouraging the individual to take the lead.
- People told us they are actively involved in developing and reviewing their care plans, ensuring their preferences and choices are respected.
- Visiting Angels Manchester East often facilitate social engagement by supporting individuals to participate in community activities, visit friends and family, or attend social groups, thus maintaining their social connections and sense of belonging.
- The Registered Manager has overall responsibility for the service and ensures high standards of care that promote independence, choice, and control.

Regulation match 9,12 (consider regulation 10).

## **I Statements**

- I feel empowered to live independently because my carers support me in a way that allows me to maintain my daily routines and activities.
- I am given the freedom to make choices about my care, from selecting my carer to deciding how and when I receive assistance.
- I have control over my care plan, with my preferences and needs prioritized, ensuring I receive the care that suits me best.

Score: 4

Rating: Outstanding

Evidence: this meant that the auditor could evidence independence, choice, and control through personalised care, encouraging self-care, facilitating informed decision-making and promoting community integration. The provider, Registered Manager and care coordinator play pivotal roles in ensuring these principles are embedded in the care provided, through quality assurance, staff training, individualised care plans and effective coordination of services.

## **Responding to People's Immediate Needs**

- Assessments and care visit notes were written in a person centred and holistic way. Planned care took account of people's personalities, preferences, life history, significant relationships, interests and goals.
- Care notes were detailed and focused on the person.
- People were regularly contacted for comments and suggestions about their care delivery and involved in regular reviews of their care.
- Care delivery may change on an hour to hour basis and the Registered Manager explained how this was made possible by extremely flexible care planning and staff deployment. Staff confirmed that care delivery responded extremely quickly to changing needs.

- The providers had a strong influence on health care providers changing the care they provided too as they were so regularly in the person's home observing changes. The Registered Manager told us that health care professionals were very quick to respond to requests for support and changes in care and treatment and that they were treated as colleagues.
- The service championed those whose voices may otherwise be seldom heard, supporting people who were unwell to have a say in their care. The service recognised what people's preferences were and carried out their wishes when they were no longer in a position to express them. For example, they supported people to remain being cared for at home when this was their wish and made note of what people found comforting so that they could offer this support when they were unable to speak up for themselves. Examples were talking about family and others who were important to the person, things they were interested in such as their pets, careers or hobbies.

Regulation match 9,10,11,12 (consider regulation 16).





### **I Statements**

- I have today met with the owner and the Registered Manager to discuss a morning care call for my lovely mum. From first contacting 'Visiting Angels' earlier in the week, I had a great feeling about what they could offer; their values and ethos is something that is great to hear.
- I had a three hour visit today, where they listened, asked questions and shared stories with myself and my mum and dad and were wonderful, it already feels like they will truly fit into our family.
- I appreciate that my carers anticipate my needs and makes proactive adjustments to my care, ensuring I always receive the best support.
- I feel heard and understood because my carer takes the time to listen to me and communicates effectively with me and my family.



Score: 4

Rating: Outstanding

Evidence: this demonstrated outstanding support and a positive approach to minimising discrimination.

### **Workforce Wellbeing and Enablement**

- The Registered Manager is exceptionally proactive with his team, staff wellbeing is everything to the management team.
- The providers have an office that staff can access to have refreshments and spend time talking with senior staff if they so wished.
- Within the office they have clearly displayed compliments that staff have received from people they supported showing staff recognition of their work.
- Where staff had difficulties or needed support there were reasonable adjustments in place. Please refer to other elements of this report in relation to this.
- The provider recognised staff value through their pay and rewards scheme, which the Registered Manager said had helped with recruitment and retention of staff.
- Staff could also be nominated for awards as unsung heroes / 'Angels.' For example, where it was felt they went above and beyond in their role to help someone this would be recognised with a gift.
- The staff team reiterated throughout both days that they felt exceptionally supported working at the service and found it to be a positive experience for them. One commented, they are like family, they look out for me.

Regulation match 9,12, 17, 18.

### **I Statements**

- I like this company very much and it is the first one I have ever worked for where my managers care for me and the rest of the team.
- They always support all of us with both work and home life.
- I want to thank [providers name] for everything, they are absolutely so humbling.

Score: 4

Rating: Outstanding

Evidence: these findings evidence how the service adapts to the individual needs of community members, allowing them to live safely and comfortably in their own homes while maintaining their independence and quality of life.

## RESPONSIVE

**Rating: Good**

**People and communities are always at the centre of how care is planned and delivered. The health and care needs of people and communities are understood and they are actively involved in planning care that meets these needs. Care, support and treatment is easily accessible, including physical access. People can access care in ways that meet their personal circumstances and protected equality characteristics.**

**People, those who support them, and staff can easily access information, advice and advocacy. This supports them in managing and understanding their care and treatment. There is a partnership working to make sure that care and treatment meet the diverse needs of communities. People are encouraged to give feedback, which is acted on and used to deliver improvements.**

This service scored 81 (out of 100) for this area.

Find out [what we look at when we assess this area](#) and [How we calculate these scores](#).

### Quality Statements – We statements

#### Person-Centred Care

- The provider has paper files as well as electronic care plans via the Access Workspace portal. The support plans are structured and informative with a simple index at the front for ease of reference.

- We could observe that a person's care file is signed off by the branch for best practice and a recent new package of care being delivered had already been audited by the care coordinator.
- 'About Me' has been written in 1st person for best practice and the auditor could observe the individual being supported was involved with this part of the planning process.
- The auditor would encourage the referrals section to be completed, this will support in further referrals and networking and development of marketing opportunities.
- As the pre admission assessment is significantly long winded it is recommended that rather than repeating and recording the medicines again, document 'please refer to medicines section.'
- During feedback we discussed writing in the 1st or 3rd person, the preferred methodology is 3rd person.
- The auditor would encourage deferring from some terminology such as "feed," the appropriate recording should state "assisting [person's name] with their meal."
- The auditor would also encourage deferring from days of the week when a person is supported with showering or bathing. For example, a support plan mentions "carer was told to shower [person's name] every Sunday unless soiled." This isn't person centred and / or individualized.
- Within a care plan review there is mention to a person receiving all of the nutritional intake once liquidized. However, within the pre assessment document this advises that [person's name] can tolerate all foods provided which can place a person at risk of avoidable harm as the current need has changed. For this purpose and to mitigate risk the auditor would recommend the pre assessment document be filed at the back of the folders as archiving to aid better outcomes for people. This was actioned immediately following feedback by the Registered Manager.

- There were some positive comments within the risk assessments. For example it is recorded "if [person's name] wants to sit, then sit with them. If they want to walk, then walk with them."

Regulation match 9 (consider regulations 10,11, 12,14).

### **I Statements**

- I am involved in all decisions about my care.
- I receive care and support that is tailored to my unique needs and lifestyle.
- I am supported to maintain my independence and continue activities that are important to me.

Score: 2

Rating: Requires Improvement

Evidence: this meant the auditor saw some shortfalls in terms of person centred care and documentation, however the auditor confidently saw actions had been taken to address these findings on day 2 of the mock inspection.

### **Care Provision, Integration, and Continuity**

- An individual receiving care and support for a chronic condition has regular check-ins from both their primary carer and a visiting nurse who coordinates with the person's doctor to manage medication and treatment plans.
- The team organizes and facilitates access to additional services such as SALT teams, physiotherapy, occupational therapy and where applicable social activities.
- The providers had appointed a care coordinator who oversees the person's entire care journey, coordinating between various services and providing support.
- People supported receive care from a consistent set of carers who are familiar with their needs and preferences. This means that the care provision is stable and reliable and ensures that there are minimal disruptions. For example, a person supported who is living with dementia receives continuous care from the same small

team of carers who have been specifically trained in dementia care, ensuring familiarity and routine.

- Staff retention is key and upon review is very positive. The auditor is confident that the providers are committed to the staff they employ and implement policies and practices that support this, such as fair pay, benefits, awards and in particular a supportive work environment.
- The Registered Manager carefully match carers to individuals based on skills, personality, and preferences to further support long-term relationships.

Regulation match 9, 12, 17 (consider regulation 10).

**Case Study written by the providers as follows:**

*"At the start of our business [person's name] was one of the first people to ring us. They spoke to [providers name] for about an hour and really enjoyed their conversation as they are both Scottish, [person's name] was expressing the struggles they were facing with their husband [person's name] but was not ready to have care in place for them. They just needed someone to listen, which we do as it is so important for someone to hear you when you are going through a difficult time.*

*We visited [person's name] once they had returned from their holiday and introduced ourselves. [person's name] were so happy to meet us in person. We chatted over a cupper and cake, talked a little about our backgrounds and why we set up our business Visiting Angels Manchester East and the conversation flowed.*

*[person's name] decided it would be great if they could have a cleaning call midweek as they felt they were falling behind with the housework, and so Visiting Angels commenced in January 2023. This helped [person's name] significantly and many letters were sent and messages commented how much of a difference this made to their lives and it allowed them more time to focus.*

*We stayed in touch as we do with all our clients, especially around their birthdays, Easter, and Christmas. We were a call away for [person's name] and would often phone me directly when things got them down, but after every phone call would feel so much better. We had reassured [person's*

*name] as they said they felt so alone that we would be with them every step of the way. We held hands and said thank you so much both of you, her hugs as we left became stronger and longer.*

*During October 2023 [person's name] made a call during the weekend saying they could not cope with and needed some support otherwise the next option would be a care home and I knew from my conversation with [person's name] that he never wanted to be in a care home. We arranged a time to go out and meet them both to discuss what would be best. They asked for three calls to be put in place for companionship, so it enabled [person's name] to go outdoors and enjoy all the things they used to whilst allowing [person's name] to attend their painting classes and to get their hair done.*

*We matched a male carer, we recognised that [person's name] had a lot of interaction with females and would benefit from a male 'Angel.' We went to introduce them and we knew after an hour they were off to a great start as they were both laughing and joking. We watched as they both went out and seeing [person's name] smiling as they walked away, we knew this was going to be a beautiful journey for all those blessed to be part of their lives.*

*I regularly received videos and photos of days out with the 'Angel.' From travelling on the tram to the Christmas markets and playing snooker to visiting a football museum are only some of the memories we captured, there are so many moments to list, which are all on our social media pages.*

*Sadly we started to see a decline and subsequently a hospital admission took place. [person's name] was admitted to the hospital early April this year and remained there until the 26th of April. With consent, we regularly visited. [person's name] would ask to take some photos and videos to share, one fond memory we share is [person's name] 'showing off' their new pyjamas, 'posing' proudly.*

*Once ready to be discharged, they were going to stay at a care home for a few weeks before returning home. Sadly, during the first night at the care home [person's name] fell and sustained a minor injury to the top of their scalp but was discharged back to the care home the following day.*

*They requested their 'Angel' visited and go out for some fresh air; [person's name] was exhausted from the time they had spent at the hospital.*

*[person's name] and I went on a long drive listening to music in my car and singing along to favourite songs. At [person's name] request we went to Head Office; they loved the main office. As the weather was not the best and [person's name] feeling cold, we took them into the training room where we ate lunch, watched their favourite cowboy movie, and drank cups of tea and enjoyed*

*nibbles. He was so happy he said he felt spoilt and felt like he was at a cinema. The reason I share this moment is because it was their wish to go for a drive as they loved cars.*

*Calls were increased and this continued with our 'Angels' visiting until the day of [person's name] 93rd birthday where we were all to meet at the care home to wish a happy birthday, but we got an update there had been collapse, and was going to be admitted into hospital once again. Sadly, [person's name] was not going to be returning to the care home. We held hands as we chatted about memories, precious moments that we captured in our hearts. They passed away that evening and since then we have continued to stay in touch, we feel honored and blessed to have shared such private moments.*

*My fondest memory was [person's name] 92nd birthday party where we sat out in the garden sharing stories with the family. It was a beautiful day we were surrounded by love and hope. Hope for [person's name] that no matter what we would alongside their family share the journey to the end."*





### **I Statements**

- I feel reassured and comforted knowing that there's someone here to help me with daily tasks and provide companionship.
- I feel empowered and independent, knowing that I can remain in my own home with the support of the 'Angels'.
- I feel appreciated and respected by my carers who take the time to understand my needs and preferences.
- I feel heard and understood, knowing that my carer listens to me and involves me in decisions about my care.
- I feel less isolated and lonely knowing that I have someone to talk to and share my thoughts and experiences with.
- I feel more engaged and stimulated, participating in activities and outings organised by my 'Angels' that help me stay connected to the community.



Score: 4

Rating: Outstanding

Evidence: this outstanding practice excels in delivering and ensuring professional and compassionate care; its seamless integration with local healthcare providers via an integrated electronic care planning system; and its commitment to continuity by maintaining high staff retention and consistent relationships. This holistic, person-centered approach not only meets but exceeds expectations, reflecting the highest standards of domiciliary care.

### **Providing Information**

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 <http://www.england.nhs.uk/ourwork/accessibleinfo>

- We observed that a person supported had a first language of Urdu and Punjabi and was supported by their family who communicated in English. Excellent coordination had been carried out to ensure that the person was supported by a staff member who spoke in Punjabi as previous communications had impacted on the relationship and increased agitated behaviours. Going above and beyond in terms of the AIS legislation.
- The Registered Manager said that people received a guide when they first started using the service with useful information on the service and contact numbers.
- People said they received information on their care from the service which was kept in a folder in their home.
- People were supported to communicate through a variety of methods. When people were not able to communicate verbally staff recognised nonverbal clues such as body language. People's needs in relation to sight, hearing and any equipment or aids required were assessed and people were supported to address these.

Regulation match 9, 12, 17.

## **I Statements**

- I receive information from the office.

Score: 3

Rating: Good

Evidence: the Registered Manager understood the AIS legislation well.

## **Listening to and Involving People**

- Staff were able to support people to give feedback on the care they received or people could give feedback independently and anonymously if they wished.
- The provider supports a person whose daughter had requested the service for [person's name]. The team were asked to support with nutritional intake and eating habits as [person's name] had lost a lot of weight. This was discussed with the carer but as they were not involved in all mealtimes only breakfast, they made sure before breakfast that time was spent making sure 'a happy person' came down for breakfast to improve appetite and improve mood. This was done by making sure [person's name] was supported during their shower and that their clothes were chosen to their wishes. Throughout this time they were reminded how well they were doing and how beautiful they looked. This built a relationship of trust and boosted [person's name] confidence which then allowed the carers to receive this amazing feedback from Louise her daughter please see attached feedback. There was a fear that support wouldn't be accepted by the individual as there had been non-compliance in the past. The family had shared their concerns; it was important for [person's name] to have her hair blow dried in the way they had always liked. The family's request was that Visiting Angels Manchester East assisted their loved one with a healthier and happier lifestyle so that [person's name] could be well enough to go on what they believe will be the last of the holidays with their Mum. This all formed a positive risk taking and it was achieved, the family will be going on holiday twice this year with Mum as the difference from the support received has had such a positive impact.

- The provider and Registered Manager gathered people's feedback under the heading of voice of lived experience. This feedback was gathered in a number of ways, through telephone surveys, face to face meetings and paper based surveys people could complete and send into the service.
- The service investigated complaints and concerns to a timescale and recorded the outcome of these.

Regulation match 9, 10, 16, 17.



### **I Statements**

- I recognise as do all of our family a big change just over the last few weeks, the medication change has 100% been a positive move. Mum just seems to have so much more get up and go about her, she's more interactive with people, more interested in things and she's eating well again. Putting weight on which is a big plus for us as a family and we are hoping that when we tell her next Wednesday she is off on holiday she will be happy about it.

Score: 4

Rating: Outstanding

Evidence: people supported were listened to exceptionally well. General feedback was that both providers were just a phone call away, day or night.

### **Equity in Access**

- We did not look at Equity in Access during this assessment. The score for this quality statement is not applicable and will not be scored due to the service having not been inspected by CQC.

Regulation match 12, 13, 17 (consider regulation 9, 10).

Score: N/A

### **Equity in Experiences and Outcomes**

- We did not look at Experiences and Outcomes during this assessment. The score for this quality statement is not applicable and will not be scored due to the service having not been inspected by CQC.

Regulation match 12, 17 (consider regulation 9, 10).

Score: N/A

### **Planning for the Future**

- We did not look at Planning for the Future during this assessment. The score for this quality statement is not applicable and will not be scored due to the service having not been inspected by CQC.

Regulation match 9,10 (consider regulation 11).

Score: N/A

## WELL LED

### Rating: Outstanding

**There is an inclusive and positive culture of continuous learning and improvement. This is based on meeting the needs of people who use services and wider communities, and all leaders and staff share this. Leaders proactively support staff and collaborate with partners to deliver care that is safe, integrated, person-centred and sustainable, and to reduce inequalities.**

**There are effective governance and management systems. Information about risks, performance and outcomes is used effectively to improve care.**

This service scored 91 (out of 100) for this area.

Find out [what we look at when we assess this area](#) and [How we calculate these scores](#).

### Quality Statements -We statements

#### Shared Direction and Culture

- The providers outstandingly promote a work life balance for all staff members. For example, one staff member commenced in post on less hours as this enabled them to continue to take care of their family. During a discussion they explained that they felt "heard" and reassured by future opportunities to develop and fulfil more hours in a manner that works for them and their families.
- A business owners they recruit individuals with various cultural needs. It is clear that these are respected and accommodated. As an example, there was a prayer mat in place which staff utilised during their breaks. During Ramadan this was used every day by staff and the management team to pray during breaks and calls. In addition to this recognition of cultural need, the providers had gone above and beyond by purchasing a 'Qibla Compass' for Muslim staff and visitors to aid them with daily prayers. This supports staff to identify the direction to face to perform prayers, reducing any tension of accessing their homes during calls.
- The management team have also purchased and made head scarfs for female staff to wear during cultural activity.

- We were informed and could observe that during Ramadan all non-participating staff members took on additional duties and tasks for their colleagues who were fasting and therefore fatigued. This meant that the team worked holistically to ensure all care calls were met and all care provision was not and was delivered consistently. The provider adopts a positive and inclusive culture that values teamwork, respect and continuous improvement. As an example Visiting Angels implements policies that promote diversity, equity and inclusion within the workplace.
- The Registered Manager and care coordinator set positive examples for the entire team. They demonstrate compassion and ethical care in all interactions with staff and the people they support.
- The wider team collaborates effectively, supporting one another to achieve shared goals and provide the best possible care. Throughout day 1 of the mock inspection we observed them all working together to solve problems, share knowledge, and support each other during challenging situations.
- The Registered Manager is an outstanding advocate for ensuring the teams understand the significance of Ramadan and it's practices, such as fasting from dawn to sunset. Throughout the induction they discuss and communicate the importance of different cultural aspects, including dietary restrictions, including the prohibition of pork and alcohol.
- The auditor was very impressed by the flexible scheduling through 'People Planner.' For example, those supported that are committed to Ramadan have their visits scheduled so that individuals can rest during fasting hours and schedule more intensive activities post Ramadan.
- Dietary needs are accommodated exceptionally well. The team ensure that meals provided are Halal and suitable for breakfast fasting, including dates and water which are traditionally used to break the fast. Furthermore, staff understand and respect that individuals may need to avoid food and drink during fasting hours.

Regulation match 10, 12, 13, 17 (consider regulation 9 and registration regulations 2009, regulation 12).

### **I Statements**

- I feel understood and respected by my carers because they have taken the time to learn about my culture and religious practices. They know the importance of Ramadan to me and ensure that my care plan accommodates my needs.
- I am able to offer flexible care times during Ramadan, ensuring that my clients receive the help they need without interrupting their fasting or prayer schedules. This flexibility has been appreciated by the clients and their families.
- I take extra care to prepare meals that are appropriate for my clients during Ramadan. Providing Halal options and understanding the importance of traditional foods for breaking the fast makes a significant difference in their comfort and well-being.
- I respect and facilitate the people I look after; I always make sure there is a clean and quiet environment for prayer.

Score: 4

Rating: Outstanding

Evidence: the service can demonstrate it's outstanding commitment to a shared direction and culture, ensuring that everyone within the organisation is aligned and working together towards common goals. Emphasising cultural sensitivity, respect and personalised care during Ramadan.

### **Capable, Compassionate and Inclusive Leaders**

- The providers offer confidence in the care that people receive across the board. They ensure that all staff are highly trained and capable beyond the basic principles of care and care provision, effectively and efficiently handling all personal and medical needs where required.
- We observed during both days of the mock inspection that the franchise owners go above the call of duty, it was exceptionally clear that this is not just a business but

that they exceed in supporting vulnerable people in their own time. For example, visiting people in hospital and not charging a fee, driving people to appointments and outings with no cost implications and purchasing items for people and staff to thank them for their dedication. It is clear that the outstanding dedication is embedded from the top.

- The providers genuinely care for everyone. Throughout day 1 it was noted that they invest in people and empower staff to develop and achieve their aspirations when others would have turned the other way.
- We found and observed that everybody is treated as a family member and that they are very much a part of a wider community.
- Both providers have such integrity and value all individuals exceptionally positively. For example staff commented "I have never felt so appreciated in all my life," I love coming into the office as it's so warm, inviting and I always feel welcomed.
- The Registered Manager embeds best practice in terms of 'Client Services Contract,' these are completed well and signed by all relevant parties.

Regulation match 6, 7,18,19 (consider regulations 4. 5 and registration regulations 2009 regulation 14.15).

### **I Statements**

- I have to give a 'thumbs up' to [provider's name], they are great. I have been supported by them now for 2 years and they have always provided the best carers.
- I think the whole service is brilliant. If we have any concerns, not that we do the Registered Manager is always there and is very responsive.
- The company name suits the service completely.
- I am very, very happy with Visiting Angels Manchester East. Everyone gets a 10 out of 10. They have helped me so much in every way and my husband right to the end. They give me so much help and I have a lovely carer who is now helping me clean my house, as I had just let it go as it had all got on top of me. Whatever I need they support me.



- I think as do my family that [provider's name] are the most marvellous people to run a care business. They have such a great care and interest about their clients and they give so much to others.
- I honestly believed this company was too good to be true, but now I know they are the most beautiful people who are always like that.
- I am proud to represent the Care Innovator for Great British Care Awards in the Northwest region category because it perfectly reflects my efforts since the startup of my company last year, underpinned by an innovative Carer-Centric model which fuels multiple benefits to our staff and users of our service.

Score: 4

Rating: Outstanding

Evidence: this meant that the auditor observed a true commitment from staff to the people they support and their managers. All of which leads to outstanding outcomes, inspiring junior staff to adopt these exceptional practices.



### **Freedom to Speak Up**

- We did not look at Freedom to Speak Up during this assessment. The score for this quality statement is not applicable and will not be scored due to the service having not been inspected by CQC.

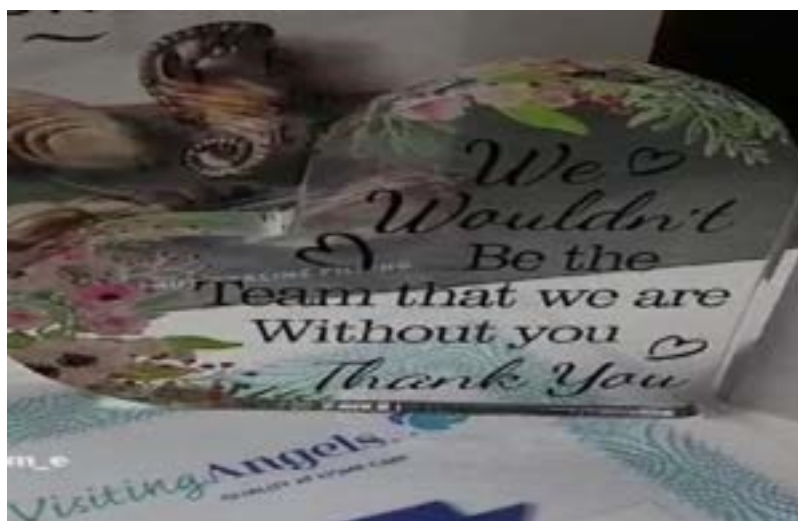
Regulation match 10, 12,13, 16, 17 (consider regulation 9).

Score: N/A

### **Workforce Equality, Diversity and Inclusion**

- The auditors observed evidence of continuous professional development for all their staff, providing training and opportunities for career development to ensure they are equipped to deliver the highest standard of care. For example, the Registered Manager utilised their good working relationship with a Physiotherapist to deliver some specialist training, enabling the carers to deliver a more safe and effective practice for the people they support.
- It was evident and witnessed how the owners are committed to supporting and nurturing their team members to fulfil their true potential, believing in them, building on their self-worth and self-belief. For example, the owners are training and developing a team member to become their Registered Manager, instilling a self-belief that they are capable, worthy and valued. Also inclusive of succession planning.
- The providers encourage open communication and are always available to receive feedback, questions and concerns from their team to ensure that their voices are heard, and their needs are met.
- We observed a supportive and collaborative work environment where every team member feels valued and empowered to contribute to their mission.
- The team focus heavily on rewarding dedication and hard work for all their team, celebrating achievements and contributions made. For example, the owner promoted and championed one of their carers who went on to win the Caregiver of The Year 2023 North.

- To remain carer centric as business owners they take the time to purchase personalised gifts and flowers and chocolates that the 'Angel' would like to receive. Appreciation in the form of gifts that have been personalised have been appreciated and this was received during discussions. Please refer to below image which is 'carer of the month.' The photo of the hamper has a prayer mat with the carers name on it, the owners recognised how important it was for the carer to perform all her prayers on time. In addition some crystal glasses were gifted as they were aware the carer loved cooking for their family and having them all round the dinner table together.



Regulation match 17, 18, 19.



### I Statements

- I would highly recommend Visiting Angels Manchester East to anyone that needs a good place to work.
- As an employee we have staff meetings and also group-chats to keep up to date with recent news of the amazing company and to praise each-other with our own personal successes. I highly recommend Visiting Angels if someone is looking for a new, positive work place.
- My journey as an 'Angel' with Visiting Angels has been absolutely amazing from the very beginning.
- I have had no issues with the company and I continue to enjoy working alongside a team of 'Angels' and management who are full of encouragement and positivity. [person's name] is the most caring person I know and always there to listen.

- I proudly work for VAME and I have to say that they're incredible at what they do. Not only do they offer the top tier standard of care which they promise their clients, VAME also reward their employees through their carer centric model. I cannot thank [provider's name] enough for giving me an opportunity to become an 'Angel.' I feel privileged whenever I am required to provide care to any given client.

Score: 4

Rating: Outstanding

Evidence: The whole experience of the auditing process was so humbling, the overall workforce were some of the most kindest people the auditors had met, visionary leaders.

### **Governance, Management and Sustainability**

The General Data Protection Regulation (GDPR) is a comprehensive data protection law that was implemented by the European Union (EU) in May 2018. The GDPR was incorporated into UK law through the Data Protection Act 2018. The UK GDPR essentially mirrors the EU GDPR with some minor modifications to make it compatible with UK law. It governs how businesses and organisations handle personal data, ensuring that individuals have control over their own data and that it is processed fairly and lawfully. The UK Information Commissioner's Office (ICO) is responsible for enforcing the GDPR in the UK and has the authority to impose fines for non-compliance. The GDPR sets out various rights for individuals, such as the right to access their personal data, the right to rectify inaccurate data, the right to erasure (or "right to be forgotten") and the right to data portability, among others.

Overall, the GDPR in the UK aims to strengthen data protection and privacy rights for individuals while also providing a framework for businesses and organisations to ensure they handle personal data responsibly and securely.

<https://ico.org.uk/for-organisations/guide-to-the-general-data-protection-regulation-gdpr/>

- It was identified by the auditor that family and relatives are involved with the care planning and review processes. The auditor observed family feedback and commentary around [person's name] recent diagnosis and the amendment required

within the support plan. This was photographed and filed and the Registered Manager had actioned this at that time.

- It is clear and reassuring to see that the Registered Manager and care coordinator carry out staff file audits regularly. The auditor would encourage actions being recorded on the audit. As an example where N/A is recorded then mention within the action why this is not applicable.
- Scheduling is managed through 'People Planner' and all calls that are missed or late are monitored by the team closely.

Regulation match 17 (consider regulation 12 and registration regulations 2009 regulation 14, 15, 16, 17, 18, 20, 22A).

Score: 3

Rating: Good

Evidence: good standards could be evidenced.

### **Partnerships and Communities**

- Both providers contribute to their local community and charitable organisations and causes, that align with their mission, to enhance the quality of life for the people they support and the wider community.
- The Registered Manager listens to feedback from those people they support and the wider community to continuously improve their services to better meet the needs of those they care for. For example, responding to the individual needs of one person they care for, arranging for a physiotherapist to work with the individual to improve their independence and quality of life.
- The provider supports community initiatives and volunteer programs that promote the well-being and independence of people and individuals with varying needs. For example, the owners are currently supporting a staff member in their own charity to raise funds and awareness to create a safe place for children to go and relax, enjoy games and activities.

- The auditor observed how the providers involve the people they care for and their families in the decision making processes, ensuring that their services are person centered and tailored to meet their unique and changing needs and preferences.
- The providers actively participate in community events to raise awareness about the importance of domiciliary care and the services they offer.

Regulation match 12,17 (consider regulation 9).

### **I Statements**

- I can't wait to go back to my voluntary role at the Royal Oldham Hospital. Absolutely loved my time there this year. Being able to be a dining companion has allowed me to gain so much experience and knowledge of how much care and support is needed for our elderly.
- I enjoyed my visits to [person's name] every week at the care home to provide some companionship, continuing their routine providing cognitive stimulation through reminiscence.
- I really appreciate how [person's name] physiotherapist, who came to support one of the people we care for, and the training they delivered for our 'Angels.'
- I am very proud to be part of the community and work in partnership with other likeminded organisations and businesses.
- I am very proud for my team, for achieving the prestigious Care Innovator Award at this year's Regional Great British Care Awards, for outstanding commitment and expertise in the home care sector.
- We were very proud to be honored with the Tameside Coat of Arms from the Mayor of Tameside for our services we provide.

Score: 4

Rating: Outstanding

Evidence: Outstanding community efforts were identified and great partnerships were observed to be evolving.

### **Learning, Improvement and Innovation**

- Knowledge and best practice is shared amongst the team and the Nominated Individual participates in external networks and forums to stay abreast of industry trends and integrates new knowledge into their service. Maintaining a knowledge-sharing platform where staff can access resources, share information, and collaborate on best practices.
- The Head Office team and wider teams are innovative and creative, bringing ideas and solutions to improve their services and care delivery. Both business owners recognise and reward innovative practices that enhance the quality of care and improve people's outcomes.
- Internal investigations were conducted well and there was clear evidence that the Registered Manager thoroughly assessed and documented all risks and that these were mitigated.
- The providers are innovative and very well recognised.

Regulation match 16.



Score: 3

Rating: Good

Evidence: there were no shortfalls evidenced during the mock inspection.



### Environmental Sustainability – Sustainable Development

- We did not look at Environmental Sustainability during this assessment. The score for this quality statement is not applicable and will not be scored due to the service having not been inspected by CQC.

Regulation match 17.

Score: N/A

### AREAS FOR ACTION

<p><b>Enforcement Action &amp; Breaches</b> the quality and safety of the service has fallen to unacceptable levels.</p>	N/A
<p><b>Immediate actions</b> to be taken as risks to people living and using the care service. Priority attention to be given to mitigate further risks. These areas will be regulation breaches or potential offenses against regulations. Where there is the possibility of enforcement action to be taken by CQC.</p>	N/A
<p><b>Moderate risks</b> to service delivery. Aim to be completed within 4 – 8 weeks These areas will be in line with CQC requirements where this is a potential breach of regulations that is not sufficient to demand enforcement action.</p>	<ul style="list-style-type: none"> <li>➤ Revisit professionals for guidance where they have been involved with someone being supported. For example, the SALT review moving forwards for someone supported.</li> <li>➤ Introduce champions into the service as these weren't visible.</li> </ul>

	<ul style="list-style-type: none"> <li>➤ Gain clarity in relation to care planning and which VA documents should be utilised as there is confusion throughout the organisation.</li> <li>➤ A better use of terminology is required, deferring from 'feeding people.'</li> <li>➤ Review risk assessments as a minimum of annual, any longer is not safe practice and will lead to potential unnecessary harm.</li> <li>➤ Decide upon the 1<sup>st</sup> or 3<sup>rd</sup> person when writing.</li> </ul>
<p><b>Development of service</b> – no current risks to people living and using the care service.</p> <p>To be completed within 6 months.</p> <p>These areas will be in line with CQC recommendations where if continued they could lead to a breach of regulations or good practice guidance would advise improvements should be made.</p>	<ul style="list-style-type: none"> <li>➤ Consider all existing professional relationships already established and arrange to meet and discuss referrals, e.g. district nurses, social workers etc.</li> <li>➤ Network in the local community from local shops, community centres, libraries to build relationships so you can become the recognised face for domiciliary care in the community.</li> <li>➤ Contact Oldham memory service with an aim to have a table outside on clinic days so when people come out after being diagnosed or reviewed you can offer support.</li> <li>➤ Contact Oldham Action Together / Social prescribers and attend activity groups as well as speaking with the social prescribers about how you can support them.</li> </ul>

	<ul style="list-style-type: none"><li>➤ Contact Oldham Carers Centre The Link Centre OL1 1DZ with an aim to talk to the team about how you can support their carer's.</li><li>➤ Reach for 'Outstanding' 😊</li></ul>
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## CONCLUSIONS AND NEXT STEPS

The contents of this report have led to actions. Please consider the advice and guidance listed and include this within your own service improvement and development plan. This should be reviewed routinely by the Registered Manager.

### **Resources**

We also advise the Registered Manager to read guidance on all regulations which can be found here.

[2015024 Guidance for providers on meeting the regulations UPDATED 2022 and 2023 \(cqc.org.uk\)](https://www.cqc.org.uk/publications-guidance/2015024-guidance-for-providers-on-meeting-the-regulations-updated-2022-and-2023)

[Regulations for service providers and managers: relevant guidance - Care Quality Commission \(cqc.org.uk\)](https://www.cqc.org.uk/publications-guidance/regulations-for-service-providers-and-managers-relevant-guidance)

[Regulations for service providers and managers | Care Quality Commission \(cqc.org.uk\)](https://www.cqc.org.uk/publications-guidance/regulations-for-service-providers-and-managers)

All Managers should access the following support resources

[Social Care Institute for Excellence \(SCIE\) and Skills for Care - Home](https://www.skillsforcare.org.uk/social-care-institute-for-excellence)

[Good and Outstanding care \(GO\) \(skillsforcare.org.uk\)](https://www.skillsforcare.org.uk/good-and-outstanding-care-go)

[Services for autistic people and people with a learning disability - Care Quality Commission \(cqc.org.uk\)](https://www.cqc.org.uk/publications-guidance/services-for-autistic-people-and-people-with-a-learning-disability)

### **Disclaimer**

This quality audit was carried out by *Sarah Singleton Carla Middleton* on behalf of Kata Care. This reflects our professional opinion based on evidence we have examined at the time. Kata Care will not be responsible for any discrepancy between this report and any CQC report which may be published.