

Ambiance Care Limited

Ambiance Care Limited

Inspection report

Unit 4, Trinity House
Newby Road Industrial Estate, Newby Road, Hazel Grove
Stockport
SK7 5DA

Tel: 01615370983
Website: www.ambiancecare.co.uk

Date of inspection visit:
05 July 2023
12 July 2023
14 July 2023

Date of publication:
20 October 2023

Ratings

Overall rating for this service	Good ●
Is the service safe?	Good ●
Is the service effective?	Good ●
Is the service caring?	Outstanding ☆
Is the service responsive?	Good ●
Is the service well-led?	Good ●

Summary of findings

Overall summary

About the service

Ambiance Care is a care at home service which provides personal care to people living in their own homes, specialising in supporting people living with dementia to remain safely in their own homes. At the time of our inspection there were 7 people receiving a regulated activity at the service. Not everyone who used the service received personal care. Care Quality Commission (CQC) only inspects where people receive personal care. This is help with tasks related to personal hygiene and eating. Where they do we also consider any wider social care provided.

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

People told us staff were exceptionally kind and caring and went to exceptional lengths to meet people's needs. Independence, respect and dignity were considered in all aspects of care delivery. People felt involved in their care, and well supported by a service that was flexible to meeting their changing needs and went above and beyond.

People received highly personalised care and were enabled to access a wide range of activities and interests and live a full life. People and families all felt able to raise concerns and were confident action would be taken in response where this was needed.

People felt safe and care was provided by a consistent team of staff who knew their needs and had been safely recruited. People received the support they needed to take their medicines. Their needs and risk were continually assessed and managed. There were systems in place to ensure lessons were learnt if things went wrong.

People's needs were assessed, and choice promoted. People were aided to access other services as needed and told us staff helped them appropriately to eat and drink well. People felt staff were very well trained and staff told us they felt they had all the training they needed and were very well supported in their role.

People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible and in their best interests; the policies and systems in the service supported this practice.

People spoke very highly about the service. People were benefiting from the approach taken by the service and the ethos and values of person centred care were embedded in all aspects of the care delivered. People and families consistently told us they would highly recommend the service, and the outcomes for people and their families were exceptionally good.

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

Rating at last inspection

This service was registered with us on 8 September 2020, and this is the first inspection.

Why we inspected

This inspection was prompted by a review of the information we held about this service.

Follow up

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

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

Good 

The service was safe.

Details are in our safe findings below.

Is the service effective?

Good 

The service was effective.

Details are in our effective findings below.

Is the service caring?

Outstanding 

The service was exceptionally caring.

Details are in our caring findings below.

Is the service responsive?

Good 

The service was responsive.

Details are in our responsive findings below.

Is the service well-led?

Good 

The service was well-led.

Details are in our well-led findings below.

Ambiance Care Limited

Detailed findings

Background to this inspection

The inspection

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

Inspection team

The inspection was completed by 1 inspector and an Expert by Experience. An Expert by Experience is a person who has personal experience of using or caring for someone who uses this type of care service.

Service and service type

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

Registered Manager

This provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the CQC to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations. At the time of our inspection there was a registered manager in post.

Notice of inspection

We gave the service 24 hours' notice of the inspection. This was because it is a small service and we needed to be sure that the provider or registered manager would be in the office to support the inspection.

What we did before the inspection

We reviewed information we had received about the service since it had registered with CQC. We sought feedback from the local authority and professionals who work with the service. We used the information the provider sent us in the provider information return (PIR). This is information providers are required to send us annually with key information about their service, what they do well, and improvements they plan to

make. We used information gathered as part of a monitoring activity that took place on 22 August 2022 to help plan the inspection and inform our judgements. We used all this information to plan our inspection.

During the inspection

We spoke with the registered manager. We reviewed a number of records including 3 people's care plans and daily records, 2 staff members recruitment files, rotas, policies, and systems for governance. We spoke with 6 people and their families, to understand their experiences of receiving support. We obtained feedback from 3 members of staff who worked at the service.

Is the service safe?

Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm. This is the first inspection of this newly registered service. This key question has been rated good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People felt safe with the staff supporting them. One family member commented, "[Family member] feels very, very safe. In the beginning they were questioning who the staff were, but now believes they are old friends who are coming to visit them."
- Staff completed training in safeguarding and understood their responsibilities to keep people safe. The service had suitable policies and procedures to underpin this.

Assessing risk, safety monitoring and management

- The registered manager assessed people's needs prior to a package of care being agreed. Assessed needs were then used to develop person-centred plans of care. Care records guided staff on how risk should be managed and mitigated.
- Staff completed training in health and safety, and supported people to access the services and equipment they needed to stay as safe as possible in their own home.

Staffing and recruitment

- Staff were suitably recruited. The service followed safer recruitment processes, with references sought regarding an employee's character from previous employers. Checks with the Disclosure and Barring Service (DBS) were completed. These checks provide information including details about convictions and cautions held on the Police National Computer and help employers make safer recruitment decisions.
- There were enough staff in post to ensure that people were appropriately supported. People and families fed back that they valued the continuity of care and people knew who would be visiting them. One family member said, "We get the same carers, including the manager and I like the continuity. I also like the little things they do like leaving the photo of the carer in the flat so [family member] knows who they are."

Using medicines safely

- Families felt staff were excellent at supporting people to take their medicines. One relative commented how staff were very proactive in ensuring people had the right level of support and staff had "arranged for a blister pack when the local pharmacist said they didn't have capacity."
- Medicine management plans were in place for people who required this type of support. These plans contained details about how staff were to support people. Staff had completed training to support people to take their medicine and the registered manager had observed their practice to ensure it was safe. The registered manager completed reflective supervisions with staff where areas for improvement were identified.
- Staff recorded medicines administered on people's medicines administration records and people were receiving the support they needed. There were regular checks and audits to ensure medicines had been correctly administered and recorded.

Preventing and controlling infection

- Staff completed training in infection prevention and control and the service had suitable policies in place.
- People and families confirmed staff wore PPE when supporting them with personal care, as needed, and always left their homes clean and tidy.

Learning lessons when things go wrong

- The registered manager had systems in place to ensure lessons could be learnt. When people had incidents or accidents, these were closely monitored to ensure appropriate action was taken and people made a recovery.
- Staff confirmed there was an open learning culture at the service when things went wrong. Staff felt able and confident to report potential safety concerns to the registered manager. They told us that opportunities to learn and reflect on any incidents were completed with the registered manager.

Is the service effective?

Our findings

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

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

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

- People's individual needs, choices and preferences were comprehensively assessed prior to them using the service. People and those who mattered to them, were fully included as part of this process. One relative commented, "There is an online system where I can see what is going on. It tells me everything about how [family member] is, their state of mind, medicines given, everything really I need to know."
- People and families commented that staff were good at ensuring an ongoing assessment of people's needs. One relative told us, "[Family member] had cellulitis on their legs. Staff noticed that very quickly and contacted the nurse and ensured they had the creams they need. Staff are all very aware of [family member's] conditions and how to meet these which is important to me."

Staff support: induction, training, skills and experience

- Staff completed a variety of training appropriate to their role which included the care certificate. The Care Certificate is an agreed set of standards that define the knowledge, skills and behaviours expected of specific job roles in the health and social care sectors. It is made up of the 15 minimum standards that should form part of a robust induction programme.
- The registered manager was proactive in seeking opportunities to learn and develop good practice. They had developed a variety of accessible information regarding dementia for people, families and staff to access.
- Staff told us they felt supported and valued in their roles. Staff spoke passionately about working for the service and support they received from the provider. One staff member told us, "The registered manager really inspires me. They are so knowledgeable and supportive. I have never had such a good manager."
- People commented that staff were very well trained. One relative said, "Staff are great at their job. They have an excellent understanding of dementia."

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

- People had detailed assessments and care plans in relation to their nutrition and hydration needs. Care plans contained information about the support people needed and what the person liked to eat. One relative commented on how observant staff were and said, "They are good at noticing things like when [family member] is not eating and is losing weight. They got tests done and arranged for the health drinks to be on prescription."
- Staff had completed training regarding food hygiene and understood the importance of encouraging good nutrition and hydration for people, as well as supporting people to remain as independent as possible in this area.

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

- People's care plans contained key information about their physical health and wellbeing to inform and guide staff on how best to support each person. Staff told us they were encouraged to take a flexible and proactive approach to meeting people's healthcare needs. Staff would liaise with other professionals and families to find the best solution to help people access any support they needed.
- Staff supported people to appointments where needed and would support people to order and collect any equipment they might need to enable them to remain as independent as possible. One family member told us, "The care team are brilliant. At one time [family member] went downhill rapidly. They lost confidence, but the carers said, 'give us 2 weeks, we know what it could be, and can sort it.' When I saw [family member] yesterday they were bright and breezy. Staff go to exceptional lengths."
- The provider's electronic care system enabled staff to record any changes in people's needs and report these to the registered manager, where referrals were made to appropriate professionals for input as needed.

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

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

When people receive care and treatment in their own homes an application must be made to the Court of Protection for them to authorise people to be deprived of their liberty. We checked whether the service was working within the principles of the MCA.

- The registered manager was proactive in encouraging people to remain as independent as possible and live in their own homes without any restrictions. At the time of the inspection nobody being supported was under a Court of Protection order. The registered manager and staff had a good understanding of how to work in line with the MCA.
- Staff told us they always sought people's consent when they supported them. People confirmed that staff asked for their consent and respected their choices. Staff had a good understanding of how to promote choice and independence with people as much as possible whilst being mindful of people's wellbeing.

Is the service caring?

Our findings

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

This is the first inspection for this newly registered service. This key question has been rated outstanding. This meant people were truly respected and valued as individuals; and empowered as partners in their care in an exceptional service.

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

- People and their relatives spoke extremely positively about the service and were very complimentary about how caring, empathetic, and compassionate the staff were.
- People told us that staff went 'above and beyond' to provide a caring service. For example, by supporting people and their families with benefits related activities, ordering and collecting specialist equipment and providing advocacy and referrals to specialist services.
- People and families shared numerous examples where staff showed great empathy and looked for flexible and creative solutions to ease people's anxiety and meet their needs. One relative commented, "When [family member] was in crisis they went back to see them at midnight to check they were ok."
- Staff were committed to providing quality care that met people's needs. Staff knew people exceptionally well and understood how best to support them. For example, staff were very successful at supporting people who were often reluctant to accept support to engage in packages of care, which included personal care. Examples included helping a person to build their confidence to a point where they were able to access the community for activities and daily living tasks such as shopping when they had not done this for many years. One staff member told us, "The focus is on relationships with people and their families. We have time to get to know people, and what they like and don't like. I see massive changes in people and how independent they become when they trust you to support them."
- There was a strong, person-centred culture at the service. The registered manager and staff gave multiple examples of how care was extremely personalised to an individual's needs, and it was evident that staff had taken time to understand a person's life story both within the records and how support was provided. There were multiple examples of how staff's knowledge of people and their lives was used to support reminisce and improve physical and mental wellbeing including in day to day tasks and planned activities.
- The service had numerous compliments and the feedback we received was very positive about the staff team who were described in glowing terms as 'wonderful' 'kind' and 'exceptional'. One relative told us, "Staff are very kind and caring. They make difficult activities pleasant. They help family member go out and support them to look after their pet which means so much to them. They are amazing."
- Staff worked together to care for the people they supported. One member of staff told us, "We are a small team, but we are always there for each other. We help each other out. The registered manager is always checking in with us, just to check how we are. If we are having a difficult day, they go out of their way to ensure we are supported."

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

- People and their relatives were actively involved in making decisions about the support they received.

- The service provided enhanced support to people's family members. The registered manager and staff recognised the strain on family carers and helped to provide opportunities for them to discuss their worries and need for support. Families all commented on the excellent communication between the service and family and felt able to speak to staff, who were described as very knowledgeable, if they needed advice or additional support.
- People's views were gathered regularly through reviews and spot checks. The provider was flexible to adapting the package of support according to people's needs and would provide additional support where required in times of crisis to ensure people's needs were being safely met. For example, when one person had been poorly support was increased until they recovered.
- People and families commented on how people were encouraged to engage in a range of activities and had noticed many benefits for people. One relative told us, "They have taken them out to the garden centre for food or coffee and they are all smiles when they return. It really puts my mind at rest."
- Feedback from people, families and staff demonstrated the service went above and beyond to ensure people lived as full and active a life as possible, and relationships were maintained. This was in excess of what would be expected of this type of service.

Respecting and promoting people's privacy, dignity and independence

- Care records considered people's privacy and dignity. Information about how to support people to remain as independent as possible was included, and staff understood the importance of this. People and their families were supported to make adaptations, and access equipment to further promote independence.
- The provider's aims and objectives were to provide supportive care and compassion to enable and encourage people to remain independent, in their own homes for as long as possible. A person-centred ethos was embedded in all aspects of staff practice. Staff told us they had plenty of time to support the person and this enabled them to never rush the person and ensure they received care in line with their preferences.
- Care plans were clear about what people could do for themselves and where assistance was needed. Staff were creative in developing strategies to ensure people felt and were able to be as independent as possible. People and families commented on how well the service managed to support people to remain independent. One family member told us, "They engage [family member] with general duties and engage them with activities such as washing up or gardening. When they go out, they send us photographs. I am bowled over by how much they do."
- Respect for privacy and dignity was embedded in the service and the care the staff delivered. Staff used language that was enabling, person centred and respected people when completing records. One relative commented, "When providing personal care, they treat [family member] with respect. I am so pleased to find them completely dependable. They always turn up."

Is the service responsive?

Our findings

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

This is the first inspection for this newly registered service. This key question has been rated good. This meant people's needs were met through good organisation and delivery.

Planning personalised care to ensure people have choice and control and to meet their needs and preferences

- The service promoted a strong person-centred culture and was committed to making a positive difference to people's lives. The provider, registered manager and staff were extremely passionate about providing person-centred care in line with people's preferences and wishes.
- The registered manager had lived experience of dementia and used this knowledge and experience to support families and people in their journey of living with dementia. For example, the registered manager understood the impact of change for people living with dementia and provided care and support at a pace appropriate to the individual. They took a holistic approach to assessing and supporting people and considered the impact of environmental factors such as lighting, and décor, and actively looked at ways to support a person to remain orientated when living in their own homes including through the use of adaptations.
- People and families all commented on the positive difference the service had made to people's lives. One person told us, "There is a person they look after who was just looking into space. Now they are having conversations with us. I asked the staff if I could have my hair done and they came over that evening to do it. Another person in our block of flats wanted a birthday card and the staff brought one. They will do anything for you, nothing is too much trouble."
- Following the initial assessment; care plans which were written in a person-centred way were developed. These included details about people's background and life story, their interests, and preferences and how they wanted to be supported. Staff had a good understanding of things that were important to the people they were supporting. For example, staff took time to support people to regain skills they had lost during their dementia journey such as around continence and were able to support individuals with continence needs, reduce the risk of them developing urinary tract infections and through this maintain their dignity and comfort.
- Systems were in place to review the care being provided by staff. The service had an electronic care planning system which was available to staff, people and their relatives. This meant that any changes to people's care and support needs could be recorded immediately to ensure continuity of care. Staff were proactive in identifying any changes and helping individuals to access the support needed. For example, a staff member supported a person to attend a range of medical appointments when awaiting a diagnosis, and throughout provided the person with reassurance and the emotional support needed. The registered manager maintained oversight of all changes and was proactive in discussing these with people and supporting the staff team.
- Daily visit records were detailed, and focused on the person, how they were, what they had been doing, and what happened during care visits. The registered manager was committed to moving away from a task-based approach to care services and wanted to ensure care was person-centred and focused on people's

physical, and mental wellbeing and supported people to live their best lives.

Meeting people's communication needs

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

- The registered manager had developed easy read formats for information for people, families, and staff. This included information they had developed about dementia and supporting people with dementia. This helped families to understand the impact of dementia upon their family member and prepare them for the journey of living well with dementia.
- Staff had a good understanding of how to meet people's communication needs. Care plans reflected all equipment and support people might need and families told us staff were kind and patient when supporting communication. Staff spoke of the importance of their relationships with people which enhanced their ability to communicate effectively with people.
- Staff gave us an example of where a person who was bi-lingual was supported to engage in conversations in the language they used as a child and the positive impact this had upon providing mental stimulation and further opportunities for reminiscence and for staff to better understand their life story.

Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities that are socially and culturally relevant to them

- Care plans detailed people's interests and hobbies and staff would spend time talking to people about their interests when supporting them. The provider shared a wide variety of examples of activities and 'magic moments' shared by staff and people supported at Ambiance care. Many of these examples are shared on the provider's website to demonstrate how people living with dementia can be supported to live well.
- People and staff would share opportunities for leisure activities such as going out for lunch or craft activities. The registered manager had developed a music play list for individuals based on their musical likes which staff could play when supporting them with personal care. Staff supported people to special events such as birthday and Christmas events, and regular community activities such as church services and social events.
- Staff actively encouraged people to reminisce and gave one example where staff supported a person to visit areas of Stockport where they had grown up. This activity reignited the person's special memories and staff were able to support them to engage in some of the activities they had participated in and enjoyed during their childhood.

Improving care quality in response to complaints or concerns

- The service had not received any complaints at the time of the inspection. The registered manager understood the importance of responding to complaints and learning lessons. The registered manager and staff were proactive in addressing any concerns people might have.
- Without exception, everyone knew who to speak with if they had any concerns or worries. Everyone was confident they would be listened to if they needed to raise a concern and that action would be quickly taken to address their concerns.

End of life care and support

- At the time of the inspection no one was receiving this type of support. The registered manager

understood how to support people as they reached the end of their lives, and they told us they would work with other health care professionals to ensure people remained comfortable and safe.

- Staff had completed training in this area and the service had guidance for staff on what to do in emergency situations. Compliments had been received from families who had been supported in this area.

Is the service well-led?

Our findings

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

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

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

- The provider and registered manager had put into daily practice, clear passion and strong commitment to ensure people received the best service possible. The provider's values and ethos of putting people at the heart of the service was embedded and reflected in everything staff did. This ensured people received care which was highly personalised, flexible and adaptable to meeting their needs.
- Staff were empowered, supported and encouraged by the provider and registered manager to go the extra mile for people, to spend time with them and provide care which made a difference and achieved positive outcomes. One staff member said, "The time we have with people makes the difference. We can spend time talking with people, getting to know them, and focusing on their needs. People appreciate the time."
- Staff consistently supported people so that they received continuity of care. New members of the team were slowly introduced to people and time was allocated to care calls for them to get to know each other. Families appreciated the reliability of the service received and commented on how this had made a real difference to people's day to day lives.
- The service had a strong person-centred, creative and flexible ethos to support people living with dementia to remain in their own homes which made it distinctive. The registered manager had developed visions and values that placed people at the heart of the service. The provider focused on recruiting staff who shared their passion for providing good quality care and the values and ethos of the service. Overwhelmingly people confirmed this approach was working for them and told us they would recommend the service to others.
- Staff consistently provided care and support that was open, inclusive, and empowered people to have choice and control. Success and innovation were recognised and encouraged. Staff consistently told us they felt able to share their views and ideas to drive improvement within the service.
- One relative commented, "I recently asked [registered manager] if they could extend the care package which they did. It went very well. I used to play golf but stopped due to [family member's] needs. Now I have started again because I can rely on Ambiance to look after them when I am not there."

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; How the provider understands and acts on the duty of candour, which is their legal responsibility to be open and honest with people when something goes wrong

- The management team actively encouraged staff to voice their opinions, enabling them to be fully involved in developing the service and putting the service's values into practice. The registered manager spoke positively about how staff had developed and shared ideas to make a difference to people using the

service.

- The registered manager understood their responsibilities under the duty of candour. Policies and procedures underpinned this. The registered manager was highly responsive to people and their family's needs.

Continuous learning and improving care

- The registered manager demonstrated strong leadership and had a good understanding of the importance of quality monitoring. Staff spoke positively of how they were supported in their role and described the registered manager as 'inspirational,' 'passionate' and 'knowledgeable'. They were very happy working for the service which they described as being "Flexible and family and relationship based."
- People and families spoke about the service's flexible approach. We were given multiple examples of how staff had adapted their approach to meet people's needs. One family member said, "Any changes go through absolutely seamlessly."

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Working in partnership with others

- The provider was good at helping people to express their views and understood things from their points of view. One relative told us, "When I spoke to the registered manager, they were exemplary. They gave me confidence because the condition [dementia] worsens and they prepared me for what to expect. They have the knowledge and are empathetic but also very grounded."
- Staff worked closely with other services and families to meet people's needs. The registered manager commented, "It's a real privilege that people and families trust us to advocate for them."
- The registered manager and staff gave us numerous examples of how they had supported people through liaising with health care services and other agencies to meet people's needs. These included when they had obtained medical support where needed, made arrangements for appropriate equipment, and supported people to celebrate occasions important to them and their family, such as birthdays and wedding anniversaries.
- People and families spoke highly of the service. One relative commented, "The service was recommended to me, and I could not be more grateful. I don't live near [family member] so have to trust them. This is a gilt gold-plated service, and I would strongly recommend it." Another relative told us, "They are unbelievably amazing, and we are delighted with them."