

Phoenix Care & Support Services 24/7 Ltd

Phoenix Care & Support Services 24/7 Ltd

Inspection report

G17, Lynch Lane Offices
Lynch Lane
Weymouth
DT4 9DN

Tel: 01305782168

Date of inspection visit:
11 July 2023
14 July 2023

Date of publication:
07 August 2023

Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service responsive?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

About the service

Phoenix Care & Support Services 24/7 Ltd is a domiciliary care and supported living provider delivering personal care and support to people in their own houses and flats. At the time of our inspection there were 32 people receiving a service.

Not everyone who used the service received personal care. CQC only inspects where people receive personal care. This is help with tasks related to personal hygiene and eating. Where they do, we also consider any wider social care provided.

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

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

Right Support:

Risks to people were assessed and regularly reviewed. Since the last inspection risk assessments had been improved to make them more specific to people's individual risks. Positive risk taking was encouraged. People told us they felt safe. Their relatives and professionals agreed. People appeared calm and happy in staff company.

A familiar and consistent group of staff meant they knew people well and understood their specific needs. People and relatives knew how to complain should they need to and were confident timely and appropriate action would be taken to resolve issues. People were supported to maintain contact with family and friends and take part in activities of their choice.

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.

Right Care:

Recruitment procedures had improved since the last inspection and were now robust. Staff demonstrated a good understanding of how to protect people from poor care and abuse. People received their medicines on time and as prescribed. Accidents and incidents were reported and follow up action taken including sharing learning to prevent recurrence.

Since the last inspection sensitive discussions had taken place with people to help ensure their preferences about end of life care were known and documented. People could communicate with staff and understand

information given to them because staff supported them consistently and understood their individual communication needs.

Right Culture:

Since our last inspection improvements had been made to the governance systems and oversight of the service. This helped to ensure and maintain care quality and safety. There was an open and supportive culture at the service. Staff got on with their colleagues, felt valued and enjoyed their work. Staff were supported and encouraged to take on new skills and qualifications.

Surveys were used to gather feedback from people, relatives and staff. Feedback was positive and all felt listened to. The management team were seen as approachable and very supportive. The service worked well with other organisations and recognised the benefits to people of establishing and maintaining links with the wider community.

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

Rating at last inspection

The last rating for this service was requires improvement (published 4 February 2020).

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?

The service was safe.

Details are in our safe findings below.

Good ●

Is the service responsive?

The service was responsive.

Details are in our responsive findings below.

Good ●

Is the service well-led?

The service was well-led.

Details are in our well-led findings below.

Good ●

Phoenix Care & Support Services 24/7 Ltd

Detailed findings

Background to this inspection

The inspection

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

Inspection team

The inspection was carried out by 2 inspectors and an Expert by Experience. An Expert by Experience is a person who has personal experience of using or caring for someone who uses this type of care service.

Service and service type

This service provides care and support to people living in 13 'supported living' settings, so that they can live as independently as possible. People's care and housing are provided under separate contractual agreements. CQC does not regulate premises used for supported living; this inspection looked at people's personal care and support.

Registered Manager

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

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

Notice of inspection

We gave the service 24 hours' notice of the inspection. This was because it is a small service and we needed

to be sure that the provider or registered manager would be in the office to support the inspection.

Inspection activity started on 11 July 2023 and ended on 25 July 2023. We visited the location's office on 11 July 2023. We visited people in their homes on 14 July 2023.

What we did before inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority. We used the information the provider sent us in the provider information return (PIR). This is information providers are required to send us annually with key information about their service, what they do well, and improvements they plan to make. We used all this information to plan our inspection.

During the inspection

We spoke with 9 people who were supported by the service and 4 relatives about their experience of the care provided. We spoke with and received written feedback from 15 members of staff including care and support workers, registered manager, care manager, house manager, training manager and business development manager. We received written feedback from 3 health and social care professionals.

We reviewed a range of records. These included 4 people's care records and multiple medication records. We looked at 4 staff files in relation to recruitment. A variety of records relating to the management of the service, including policies and procedures were reviewed.

Is the service safe?

Our findings

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

At our last inspection we rated this key question requires improvement. At this inspection the rating has changed to good. This meant people were safe and protected from avoidable harm.

Assessing risk, safety monitoring and management

- People had risk assessments which gave clear control measures and guidance to help keep people safe without being overly restrictive. Since the last inspection these had been improved to make them specific to each person's presenting risks.
- People told us they felt safe. People were relaxed and happy in staff company. Comments included, "Yes absolutely feel safe", "Yes, I feel safe from them helping me. I'm very happy where I am", "Yes, I feel safe. They are very good", "They make me feel safe" and, "I feel safe because they care about us. I'm happy when they come."
- A professional told us, "I am happy with the service that Phoenix Care provide these service users, to the point that I would be happy for a family member of mine (if necessary) to be supported by them."
- Relatives comments included, "It's such a huge weight off my shoulders to know [name] is safe and cared for", "I have no concerns because I know [name] is being well looked after and is safe with them" and, "[Name] is really looked out for and looked after well, [name] wants for nothing."
- There were enough staff to keep people safe and help ensure they received their funded 1 to 1 time. When 1 to 1 time needed to be reviewed staff contacted the respective local authority.
- People had personal emergency evacuation plans in place. These detailed the support a person needed to leave their home in an emergency situation. These plans considered people's needs such as mobility and communication.
- Regular competency checks took place to help maintain and improve the care and support people received. Staff told us, "This has been a regular occurrence while working. I feel this helps improve the quality of the service" and "These checks are important to help us improve and to ensure competence in keeping service users safe."

Staffing and recruitment

- Recruitment procedures had improved since the last inspection and were now robust. This included Disclosure and Barring Service (DBS) checks. These provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.
- There were enough staff on duty. Recruitment of staff was ongoing. The service had faced the same challenges as other providers due to the national shortage of care workers.
- Staff were supported to undertake shadow shifts with more experienced staff so they could get to know people well and gain confidence in their role. A staff member had fed back, "My shadow shifts have been amazing, can go as far as saying it's been the better shadowing shifts, I have had when starting a company."

Using medicines safely

- People were supported by appropriately trained staff to take their prescribed medicines. Since the last inspection this area of people's care was formally and regularly audited. Staff had their competency assessed to ensure their practice was safe and they were confident.
- Where people were prescribed medicines they only needed to take occasionally, guidance was in place for staff to follow to ensure those medicines were administered in a consistent way.
- Medicine records clearly detailed what medicines people required and the reason it was prescribed. Medicine records were legible, complete and audited appropriately.
- There was some inconsistency in staff recording of open dates on people's liquid medicines. We raised this with the house manager and care manager. They sent a memo to staff to ensure they always recorded on medicines bottles when they have been opened. No harm had been caused by this omission.

Systems and processes to safeguard people from the risk of abuse

- Staff demonstrated a good understanding of how to safeguard people in their care from harm and abuse. They told us they felt confident management would listen and take action if they raised concerns.
- Staff had received training in safeguarding and were confident any concerns they raised would be taken seriously and acted upon in a timely way by the registered manager.
- Safeguarding records showed all necessary actions and referrals to the local authority had been made.

Preventing and controlling infection

- Infection prevention and control procedures were in place and robust. Staff had received training in safe practice and how to prevent avoidable infections.
- The service had an infection control policy and all staff had received training in infection prevention and control.
- The supported living location we visited was visibly clean and hygienic.

Learning lessons when things go wrong

- Accident and incident reports were completed following incidents. These were reviewed and signed off by management. This helped identify types of incidents, de-escalation strategies used and trends. Learning was shared via team meetings, handovers and supervision. A staff member said, "After incidents occur, we not only hand over the particular situations but team meetings are also held to work together to improve the situations and circumstances and find new ways to support service users in a positive environment while maintaining people's independence and dignity."

Is the service responsive?

Our findings

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

At our last inspection we rated this key question requires improvement. At this inspection the rating has changed to good. This meant people's needs were met through good organisation and delivery.

Improving care quality in response to complaints or concerns

- At the last inspection we received mixed feedback about people's confidence in making a complaint should they need to. At this inspection, people and relatives told us they knew how to complain and felt confident any issues raised would be addressed and resolved. A person told us, "I had an issue with another person. They sorted that out straight away. They were really good with that."
- The service had a complaints policy and procedure in place. This detailed the nature of each complaint and steps taken to acknowledge, investigate and resolve the identified issue. Relatives shared, "We would not need to complain and are always kept informed of things", "I have no need to complain and the communication is great" and, "I would of course know how to complain but can, hand on heart, say I've never needed to."

End of life care and support

- Since the last inspection the service had sensitively explored, and recorded people's end of life wishes with them. People now had Easy Read end of life plans.

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

- People's care plans were detailed and personalised. Staff knew people well. People told us they were involved in their care reviews and felt listened to. Their comments included, "They include me", "I feel listened to", "They are always there for me" and, "They get my views about things." A relative said, "They know, and have got to know really quickly, [name's] likes and dislikes."
- Since the last inspection the provider had introduced a new communication app which meant staff could stay up to date with changes in people's needs and new strategies to support them. Staff told us, "The app has been a major recent improvement, it's great for communication. Having this information benefits the service user as all staff have the same updated information", "[With the app] we have all been able to communicate in groups to support each client and address any issues immediately" and, "This gives us more time to engage more in activities with service users."
- Relatives told us they were, where appropriate, consulted and kept informed of changes. Relatives shared, "Communication is second to none, it's spot on", "They said to me from day one, you can come in at any time and discuss or ask anything you want, their door is always open" and, "We can log in to see [name's] care plan and that's everything."
- Professionals felt the service was responsive to their requests for information when working alongside them to support people. Their comments included, "The management and administrative staff are always friendly and responsive to my calls and queries and will email me any requested documentation promptly" and, "I have always found the team friendly and very helpful. They are professional and are helpful to me"

when I ask for paperwork or have to come and see the people that I support."

Meeting people's communication needs

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

- Information was available to people in accessible formats and staff understood and met people's individual communication needs and preferences. A staff member said, "Communicating with someone in their preferred way not only respects them but gives them choices and freedom."
- People had individual communication plans/passports that detailed effective and preferred methods of communication, including the approach to use for different situations. These were reviewed by staff most familiar with the person's needs at set intervals or if there were any changes.

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

- People were supported to stay in contact with relatives and friends. A relative shared, "Visiting is not a problem, I can appear whenever I like and even take [name] out every Saturday."
- People were supported to take part in activities of their choice and that they enjoyed. Photos and daily records evidenced people took part in regular and varied activities according to their preferences. A relative told us, "There are lots of activities and that is so good for [name's] well-being."
- Staff provided person-centred support with self-care and everyday living skills to people. This gave people a sense of purpose and supported them towards greater independence.

Is the service well-led?

Our findings

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

At our last inspection we rated this key question requires improvement. At this inspection the rating has changed to good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

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

- Since the last inspection the new electronic care system had been embedded within day-to-day practice and was being used to carry out formal auditing and monitoring of service quality. This helped ensure quality performance, risks and regulatory requirements were understood and managed.
- The service was well led. The registered manager, care manager and other management staff demonstrated passion and commitment to providing quality care and having a motivated and resilient staff team. Relative comments included, "They are just fantastic from the top down", "It is a very organised affair, they are hot on it and have great communication" and, "The management is very good and on top of everything 110%."
- The registered manager had a good understanding of CQC requirements, in particular, to notify us, and where appropriate the local safeguarding team, of incidents including potential safeguarding issues, serious injury and changes to the service. This is a legal requirement.
- Staff told us they were praised and felt appreciated for the work they did. Their comments included, "I feel appreciated by being thanked and praised at work on a regular basis from management. We have regular social gatherings, Christmas parties and gifts", "All management show appreciation", "Every year they get us a present to say thank you for all the hard work we do" and, "If I cover other shifts I always get a thank you."

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

- The service had a positive and supportive culture. Staff felt happy in their roles and told us they got on well with their colleagues. Staff comments included, "We have very good communication", "I feel proud to work for this company as the standard of care is high and co-workers care about their job and we have high standards", "I'd describe the culture as positive, motivating, supportive, transparent, kind, caring and trusting" and, "This service is transparent, professional and supportive. From [registered manager] at the top to other support workers alongside me everyday service users are the priority."
- People, relatives and staff were positive about the management team. They were seen as approachable and very supportive both with work and personal issues. People and relatives commented, "[Registered manager] is lovely and supportive", "[House manager] is very, very helpful and [registered manager] is helpful as well", "[Care manager] does an amazing job" and, "I have a [specific family issue] and they could not be more helpful."
- The registered manager and care manager spoke positively about the staff team stating, "They are great, they are loyal, we have a lot of longstanding staff members, they really care about the people we support."

- Staff told us they were proud to work for the service. Staff comments included, "I've been with them for [number] years and hope to retire here! I like the company, staff, management and culture", "I do feel proud as it is very much like a big family, and I have never heard anything bad said about them in the community. I have recommended friends to work for them" and, "I'm proud and honoured to be part of a team that are appreciative of everyone - service users and staff. They really are the best I have ever come across."
- Since the last inspection people's tenancy agreements had been made independent of their care agreements. This meant people were not at risk of losing their home if they experienced times of emotional distress.

How the provider understands and acts on the duty of candour, which is their legal responsibility to be open and honest with people when something goes wrong

- The registered manager had a good understanding of the duty of candour. They explained, "It's about being open and honest with all stakeholders in terms of anything that has gone wrong, apologising, providing reassurance and advising of changes made to help make people safe and identifying learning."

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

- People had been given the opportunity to provide feedback on the service via surveys. People's surveys were in Easy Read format and feedback was positive. A relative told us, "We have filled in questionnaires and always say how pleased we are with the service."
- Staff feedback was sought annually via questionnaires. Staff were also given the opportunity to share their views when starting with the provider. Feedback was positive.

Continuous learning and improving care

- Staff were encouraged and supported to increase their skills and knowledge. This included suggesting additional courses and qualifications that may help improve their practice and further their career in care. Staff told us, "We are continuously provided with training on new topics" and, "You can elect to do speciality courses and there is always an opportunity to get more training. The company offer national vocational qualifications as well to support people to further their care career."

Working in partnership with others

- The service worked in partnership with other agencies to provide good care and treatment to people. The registered manager is working to improve communication links with some external professionals.
- The service had developed and maintained links with the local community including local churches, clubs, day services and a farm.