

Premier Care Limited

Premier Care Limited - Rochdale Branch

Inspection report

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Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service effective?

Good ●

Is the service caring?

Good ●

Is the service responsive?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

Premier Care Limited- Rochdale Branch is a domiciliary care agency. 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. At the time of the inspection the agency was providing personal care to 85 people.

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

People were provided with safe care and support. Safe systems of recruitment were in place and people told us they felt safe. Risks were well managed. Medicines were stored and administered safely.

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's needs were assessed before they started to use the service. The service was well organised and visits were rarely missed or late. Staff received the induction, training and support they needed to carry out their roles effectively. People's nutritional and health needs were met.

People told us staff were caring and kind and spoke fondly about the staff who supported them. People said, "There is always a smile when they come. I wouldn't swap them." Staff and managers knew people well. People were treated with respect and dignity; staff supported people to maintain their independence.

People were provided with personalised care that took account of their needs, wishes and preferences. Care records were person centred. There was an appropriate system in place to manage complaints. People's wishes for end of life care and support were identified, respected and recorded if they wished.

There were good systems of quality assurance checks and audits. Everyone was positive about the registered manager and the way the service was managed and organised. The registered manager was committed to providing responsive, person centred care and support. Staff we spoke with shared this commitment. The provider had notified the Care Quality Commission (CQC) of significant events such as safeguarding concerns.

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

Rating at last inspection

The last rating for this service was good (published June 2017).

Why we inspected

This was a planned inspection based on our published methodology.

Follow up

We will continue to monitor information we receive about the service until we return to visit as per our re-

inspection programme. If we receive any concerning information we may inspect sooner.

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 effective?

The service was effective.

Details are in our effective findings below.

Good ●

Is the service caring?

The service was caring.

Details are in our caring 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 ●

Premier Care Limited - Rochdale Branch

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 Care Act 2014.

Inspection team

The inspection was undertaken by two inspectors.

Service and service type

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

The service had a manager registered with the CQC. This means that they and the provider are legally responsible for how the service is run and for the quality and safety of the care provided.

Notice of inspection

The inspection was announced. We gave the service 48 hours' notice of the inspection. This was because we needed to be sure that the provider or registered manager would be in the office to support the inspection. Inspection activity started on 29 January 2020 and ended on 4 February 2020. We visited the office location on both days.

What we did before inspection

We used the information the provider sent us in the provider information return. This is information providers are required to send us with key information about their service, what they do well, and improvements they plan to make. This information helps support our inspections. We reviewed information

we had received about the service. We sought feedback from the local authority involved with the service. We asked Healthwatch Rochdale for their views on the service. Healthwatch is an independent consumer champion that gathers and represents the views of the public about health and social care services in England. We used all of this information to plan our inspection.

During the inspection

We spoke on the telephone with four people who used the service and two relatives about their experience of the care provided. On gaining permission we visited two people who used the service in their homes. We also spoke with eight members of staff including the registered manager, operations manager, care coaches, support workers and the pharmacist compliance officer.

We reviewed a range of records. This included five people's care records, eight people's medication records and other records of care provided. We looked at four staff files in relation to recruitment. A variety of records relating to the management of the service, including training, 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 the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People were protected from the risk of harm, abuse and discrimination. People told us they felt safe.
- Staff were aware of their responsibilities to protect people from abuse. They told us they were confident in raising concerns and felt they would be dealt with appropriately. One staff member said, "If I saw anything that concerned me, I'd report it to the office. 100% it would get dealt with."

Assessing risk, safety monitoring and management

- Risks to individuals, and within their homes, were identified and well managed. Care records clearly explained to staff what needed to happen to keep people safe.
- Risk assessments were person centred and were reviewed regularly and updated when people's needs changed.
- There was a plan to guide staff on what to do in the event of an emergency that could threaten delivery of the service.

Staffing and recruitment

- There were safe systems for staff recruitment in place. All required checks were completed prior to staff starting to work at the service.
- Staff told us they had the time they needed to spend with people. Travel time was included in staff rotas and visits were arranged so staff stayed in the same geographical area as much as possible.

Using medicines safely

- Medicines were stored and administered safely.
- Systems for checks and audits of medicines had recently been reviewed and improved. This helped to ensure managers were aware of any changes in people's medicines and were able to respond promptly to any visit changes that were needed as a result.
- Staff had received training in the administration of medicines and had regular competency checks.

Preventing and controlling infection; Learning lessons when things go wrong

- There were systems in place to prevent the spread of infection or disease.
- Staff had completed training in infection prevention. Staff told us they always had access to personal protective equipment. One staff member said, "We've got ample supplies." People told us staff used disposable gloves and aprons when they were supporting them.
- Records were kept of accidents and incidents that occurred to people who used the service and to staff. The registered manager monitored these and identified any lessons that could be learned to prevent future

occurrences.

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.

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant people's outcomes were consistently good, and people's feedback confirmed this.

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

- People's needs were assessed by managers and their individual preferences identified before people started to use the service. Records identified what was important to and for the person. This helped to ensure staff could meet people's needs.
- People told us the service was well organised and visits were rarely missed or late. There was an electronic system that alerted managers if staff had not arrived on time. People said, "They have never missed a visit" and "They are so reliable. Everything about them is good."
- The way the visits were organised ensured people had continuity of care. Staff and people who used the service got to know each other. People said, "We see the same staff most of the time. We've got to know each other well" and "They know what I like."

Staff support: induction, training, skills and experience

- Staff had the skills, knowledge and experience they needed to carry out their roles effectively. Staff completed an induction and a range of training the provider considered mandatory. They also worked alongside experienced staff before starting to work on their own.
- Staff were positive about the training they received and told us they were encouraged to undertake additional training in subjects that interested them. One staff member told us, "I love doing the training. I can ask for extra training if something interests me and [the management] will sort it."
- Staff received regular supervision and were very positive about the support they received.

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 Act 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 provider was working within the principles of the MCA. People's capacity to make decisions was assessed and regularly reviewed.

- Records guided staff in how they could help people make decisions.

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

- People lived in their own homes and could eat what they wanted.
- Staff had received training in nutrition, food hygiene and preparation.

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

- People were supported with their health needs and had access to a range of health care professionals and regular health checks.
- Where people needed support to attend medical appointments visits were rearranged so staff could provide the support.
- The registered manager had worked with local GP's to ensure the information they held about people's medicines was kept up to date.

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.

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant people were supported and treated with dignity and respect; and involved as partners in their care.

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

- We looked at whether the service complied with the Equality Act 2010 and how the service ensured people were not treated unfairly because of any characteristics protected under the legislation. Our observations of care, review of records and discussion with the registered manager, staff and people demonstrated that discrimination was not a feature of the service.
- People told us staff were caring and kind and spoke fondly about the staff who supported them. People said, "There is always a smile when they come. I wouldn't swap them" and "They are cheerful."
- Staff spoke fondly about people who used the service. Staff and managers knew people well and knew their likes and dislikes. They gave us examples of how they had worked flexibly to ensure people's needs were met.

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

- People and where appropriate those who were important to them were involved in decisions about their care. People were encouraged to make choices about how they were supported. A relative of a person using the service told us, "They know [my relative] and what they want."
- A staff member told us, "We talk a lot and I listen to what people say and give them choices. It's important to get to know people so we feel comfortable with each other. It's not a problem if a person wants something in their care plan changing. I just tell the office staff what the person wants and it's done."
- People's preferences and routines were respected. One person said, "I'm happy with them, I've got a routine and [staff] know it."

Respecting and promoting people's privacy, dignity and independence

- Staff placed great importance on maintaining and promoting people's independence. Care records gave good detail of what people could do for themselves and how staff could promote people's independence. A relative told us, "They help [person who used the service] in the shower. They don't do everything just the things [person] can't manage. They leave [person] to it so they're not in the bathroom all the time with them. They're very efficient."
- Staff treated people with respect and dignity. One person said, "They [staff] are so well mannered." People's care records highlighted to staff how people's dignity and privacy could be protected.
- People's right to confidentiality was respected. Policies and procedures showed the service placed importance on protecting people's confidential information.

Is the service responsive?

Our findings

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

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. 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

- People received personalised care that took account of their needs, wishes and preferences.
- Plans of care were detailed and person centred. They gave staff information about what was important to and for the person, their likes, dislikes, routines and preferences.
- Care records were reviewed regularly and updated when people's needs changed. People were involved in these reviews and they clearly identified if people wanted any changes to their care and support.

Meeting people's communication needs

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.

- Information was available in alternative formats including pictorial and easy read formats. It was also available in alternative languages for people where English was not their first language.

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

- We saw visits were sometimes rearranged so staff could support people to continue to attend regular social activities. One person's family member was going on holiday, this would have meant the person could not attend their day service as they needed help to get there. Visits were re arranged so staff could support them with transport.
- People using the service were invited to parties in the office for special events. One member of staff commented, "They bring food in and we have a right laugh."

Improving care quality in response to complaints or concerns

- There was an appropriate system in place to manage complaints. People we spoke with told us they felt able to complain. One person commented, "I can talk to the care workers or the office, it doesn't matter." Another person said, "I have never needed to get hold of the office I just tell them[staff] and they listen."
- Complaints were logged on a computer system so they could be analysed to identify any trends or themes. People were also asked if they had any complaints during reviews of their care. The registered manager ensured action was taken if lessons could be learned to improve the service.

End of life care and support

- People's wishes for end of life care and support were identified and recorded if they wished. Records also

identified where people kept funeral plans or advanced decisions about resuscitation so these could be found easily if needed.

- Staff were offered additional training in advance care planning and palliative care at a local hospice.

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 the last inspection this key question was rated as good. At this inspection this key question has remained the same. 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

- Robust systems of daily, weekly and monthly quality assurance checks and audits were in place. This included regular checks of staff performance and the support they provided. Where issues were found they were dealt with promptly.
- People spoke highly about the service and the way it was managed and organised. People told us, "It's easy to get through to the office and they sort whatever I ask", "I think they're quite organised" and "I can speak to anyone in the office it doesn't have to be the [registered manager]."

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

- The registered manager was committed to providing responsive, person centred care and support. Staff we spoke with shared this commitment. A staff member said, "She [registered manager] will do anything for you."
- Staff told us an open culture in the service was promoted. They felt able to make suggestions to improve the service. They told us, "I knew it would be easy to work with the office staff, they respond straight away" and "They are very good managers."
- People and their relatives had opportunities to give feedback about the service.
- There was a statement of purpose. This explained the service's aims, values, objectives and services provided.

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 was aware of their responsibility regarding duty of candour.
- It is a requirement the provider displays the rating from the last CQC inspection. We saw the rating was displayed on the provider website and in the office along with other information about the provider's registration with CQC.
- The registered manager had notified CQC of significant events such as safeguarding concerns.

Continuous learning and improving care; Working in partnership with others

- Managers had built links with local care providers such as a local hospice to share training and best practice with their staff. The registered manager encouraged staff to take part in local initiatives such as a

'Keep Warm' campaign for homeless people. The registered manager had approached local businesses to see if they would donate quilts to be distributed to homeless people.

- The registered manager had a system in place that enabled them to review any accident, incident, safeguarding or complaint. This helped ensure they could identify good practice and where improvements needed to be made. Systems were in place to ensure information about improvements was given to staff.
- The service had a range of policies and procedures to guide staff on what was expected of them in their roles.