

Prestige Nursing Limited

Prestige Nursing Limited Shrewsbury

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

About the service: Prestige Nursing Limited Shrewsbury is registered to provide nursing and personal care to people of all ages living in their own homes. The service provided personal care to 43 people at the time of our inspection.

People's experience of using this service: People and relatives told us staff were kind and caring in their approach. People told us staff communicated well with them and acted in an open and transparent way.

Care plans were person-centred and provided staff with the information they needed to provide care and support in a way that met people's needs and preferences.

People's calls were usually on time or staff called if they were going to be late. The provider monitored staff attendance at calls using electronic call monitoring.

Medicines were managed in line with good practice guidance.

Staff assessed risks to people's health, safety and wellbeing and put plans in place to manage these risks.

People told us they would feel confident to raise any complaints they might have. We saw complaints were identified, investigated and used to improve the service.

There were processes in place to monitor the safety and quality of the service.

The service had a registered manager in post at the time of our inspection.

The management team had excellent knowledge and a wealth of experience to operate the service safely and effectively. They demonstrated an exceptional understanding of all aspects of managing the service such as safeguarding procedures and medicines management.

People, relatives and staff were engaged by the service via meetings, forums, questionnaires and projects so that everyone could contribute to the development of the service. There was a credible strategy in place with plans for multiple new improvements and updates at the service. This was being implemented by the registered manager who was proactive in considering how the service could be improved.

People, staff and relatives spoke positively about the registered manager and senior team who led the service well.

The service met the characteristics of Good in all areas.

More information is in the full report.

Rating at last inspection: At the last inspection the service was rated as Good (15 July 2016).

Why we inspected: This was a planned inspection to check that this service remained Good.

Follow up: We did not identify any concerns at this inspection. Going forward we will continue to monitor this service and plan to inspect in line with our re-inspection schedule for services rated Good.

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

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 ●

Prestige Nursing Limited Shrewsbury

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. This inspection was planned to check whether the provider was meeting the legal requirements and regulations associated with the Act, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

Inspection team: This inspection was carried out by one adult social care inspector.

Service and service type: Prestige Nursing Limited, Shrewsbury is a domiciliary care agency. It provides personal care to people living in their own homes.

The service had a manager registered with the Care Quality Commission. 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: We gave the service 48 hours' notice of the inspection visit because it is we needed to be sure that staff would be in the office to support the inspection.

Inspection site visit activity started on 6 March 2019 and ended on 15 March 2019. We visited the office location on 6 February 2019 to see the registered manager and management team; and to review care records and policies and procedures. We made calls to people using the service, residents and staff on 15 March 2019.

What we did: Prior to the inspection, we reviewed all the information we held about the service including notifications received by CQC. A notification is information about important events which the service is required to tell us by law.

During our inspection we spoke with nine members of care staff including the management team, three

people using the service, and three relatives. We also spoke with two health and social care professionals that had experienced working with the service.

We reviewed a range of records. This included care records, information relating to staff recruitment and supervision and the training records for all staff. We also reviewed records relating to the management of the service and a variety of policies and procedures developed and implemented by the provider.

Is the service safe?

Our findings

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

People were safe and protected from avoidable harm. Legal requirements were met.

Systems and processes to safeguard people from the risk of abuse

- People told us they felt safe. One person told us, "It is reassuring knowing someone is coming every day. I don't know what I would do without them really."
- Staff told us that they had effective safeguarding training and could explain the safeguarding processes in detail.
- Staff were confident that action would be taken if they raised any concerns relating to potential abuse. One member of care staff said, "The team at the office have been very receptive to any concerns or issues that I've raised, I wouldn't hesitate to speak to report anything of concern."
- The provider had effective safeguarding and whistleblowing systems and policies in place.
- The registered manager was aware of their responsibility to liaise with the local authority if safeguarding concerns were raised.

Assessing risk, safety monitoring and management

- People's needs and abilities had been assessed in a pre-assessment plan. The potential risks to each person's health, safety and welfare had been identified.
- Risk assessments were detailed within categories for example, nutrition, mobility, environmental and were individualised. The risk level and actions to reduce the risk were clearly documented.
- Risks to people were regularly reviewed and safely managed.

Staffing and recruitment

- The provider followed safe staff recruitment procedures. Records confirmed that Disclosure and Barring Service (DBS) checks were completed and references obtained from previous employers.
- There were enough staff to meet the needs of people and deliver a consistent service.
- Staff had completed induction training in line with the providers policies and had competency checks to ensure they understood the training provided.

Using medicines safely

- Risk assessments relating to medicines were carried out where people needed support from staff.
- Medicines were stored securely in people's homes when this was necessary.
- People's independence to manage their own medicines was maintained if safe to do so. Any changes to this was done with people's full consent.
- People told us they were happy with the support they received to take their medicines.
- Records showed that medication was administered as prescribed.
- Medicines administration record sheets (MARS) were prepared by the management team and had oversight of managers through an auditing process to help ensure medicines were given safely as

prescribed.

Preventing and controlling infection

- Staff had completed infection control training.
- Unannounced spot check visits were completed by the manager. This ensured care staff followed the infection control procedures and used personal protective equipment (PPE) when carrying out personal care, food preparation and handling.
- Staff told us they had access to PPE which was stored at the office.

Learning lessons when things go wrong

- The provider showed us a copy of the accident form that staff would complete in the event of any injury, significant incidents or near misses. We saw this prompted staff to consider any 'lessons learned'.
- Incidents and accidents were regularly audited to check for trends or patterns, to mitigate further risks.

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

People's outcomes were consistently good, and people's feedback confirmed this.

Staff working together to provide consistent, effective, timely care

- People, relatives and staff told us that there was continuity of care. People had visits from regular staff. One person said, "I always know who is coming, regular carers who seem to know what they're doing." A relative told us, "It is a consistent service on the whole, we have a list of who is coming and they are all very nice and helpful."
- Care plans were regularly updated and audited by managers to ensure that changes in need were documented. A relative told us, "Staff are very sensitive to [relative's] needs, there are regular assessments and changes are updated in the file."
- Staff communicated effectively with each other. Staff told us the methods they used to communicate included written notes within people's homes, texting and emailing. Staff also shared information at team meetings. A staff member told us, "An electronic care management system is going to be in place soon so this will improve our ability to communicate even more."

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

- People's needs were assessed before the service began to provide support and people confirmed this. This included their physical, social and emotional support needs.
- Staff confirmed they received information about people new to the service and were always introduced to the person by a manager before they went to them to provide care. The registered manager and staff were confident that any needs associated with people's protected characteristics would be met.
- Care was planned and delivered in line with people's individual assessments, which were reviewed regularly or when needs changed.
- Staff applied learning effectively in line with best practice, which led to effective outcomes for people and supported a good quality of life.

Staff support: induction, training, skills and experience

- Staff received training, support and induction to enable them to meet people's needs. All staff were up to date with the mandatory training and bespoke training could be provided on request.
- One staff member we spoke with told us they felt they had received adequate training to meet the needs of the people they were supporting. They said, "The induction is thorough and we have a staff member portal where we can access the training we need to do and access our rotas which is really useful."
- A health and social care professional told us, "Care staff have been professional and always prepared to adapt to meet people's needs."

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

- People told us they were supported appropriately with eating and drinking. One person told us, "I am

always given a choice of food and I'm not rushed." Another person told us, "The staff pick me items in on their next visit if I need things."

- We saw people's preferences and requirements were recorded within people's files.
- Where required staff recorded how much and what a person drank. This information was then used to ensure appropriate healthcare was sought if needed.
- People's risk assessments considered whether there were any risks in relation to eating and drinking.

Supporting people to live healthier lives, access healthcare services and support

- Prestige Nursing Limited, Shrewsbury supported a project called 'SaTh2Home' which allowed people to leave hospital and access four days support at home as soon as they were medically ready. A health and social care professional told us, "Prestige have embraced a discharge to assess culture and their commitment to high standards is a big part of why SaTh2Home has been successful. Most of our patients have had experience with multiple care agencies and honestly our biggest problem is that once they have had Prestige they don't want to transition onto a different agency."
- When people needed referring to other health care professionals such as GP's or district nurses, staff understood their responsibility to ensure they passed the information on to relatives and managers. Alternatively, staff assisted the person to call for support themselves.
- Relatives told us that staff effectively identified any health concerns and ensured the correct professional was contacted as necessary.

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.

We checked whether the service was working within the principles of the MCA, whether any restrictions on people's liberty had been authorised and whether any conditions on such authorisations were being met.

- We saw that care files contained details about people's capacity to make decisions.
- Care plans were developed with people and their relatives. People had agreed with the content and had signed to receive care and treatment.
- Staff ensured people were involved in decisions about their care; and knew what they needed to do to make sure decisions were taken in people's best interests.
- Staff told us that if they had any concerns about decision making they would pass this on to the directors.

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

People were supported and treated with dignity and respect; and involved as partners in their care.

Ensuring people are well treated and supported; equality and diversity

- People and relatives told us staff were very caring. One person told us, "The carers are all friendly, they don't feel like strangers." A relative said, "I feel assured that the carers are all lovely with [Relative] and I can go on holiday knowing that everything is ok." Another relative said, "They are lifesavers, absolutely brilliant."
- Staff told us they used care plans to find out about people, get to know the person and build positive relations with them. One staff member said, "The quality of the care plans is good, I always have a scan through at each visit to make sure nothing has changed so I can care for people the way they like."
- Staff were respectful when speaking about people and were considerate of the equality and diversity needs of people including protected characteristics. Staff actively considered people's cultural or religious preferences.
- All new staff received training in equality, diversity and inclusion as part of their induction and shadowed a more experienced member of staff until they were assessed as competent to work independently.

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

- People confirmed care staff listened to them, involved them in decisions and respected their views.
- Care plans were reviewed regularly and as and when a person's needs changed. The person and relatives were involved in reviews of their care plan if this was required. A relative told us, "Any changes are always discussed with the family and the service are approachable if we think something needs to be updated."
- None of the people who used the service at the time of our inspection had an advocate. The provider explained they would share information about local advocacy organisations with anyone who they felt may benefit from independent support with decision making.

Respecting and promoting people's privacy, dignity and independence

- People were supported by staff who were attentive, kind and caring. Staff had a good understanding of people's needs and wishes. Staff ensured people's privacy and dignity. A relative told us, "Staff are always considerate of [Relative's] dignity and privacy."
- Consideration to privacy and dignity was embedded throughout each care plan we saw.
- The provider was proactive in ensuring that they complied with Accessible Information Standards. These are standards introduced by the government in 2016 to make sure that people with a disability or sensory loss are given information in a way they can understand. The service adapted information to meet people's needs, for example information about the service had been produced in large print for one person who used the service.

Is the service responsive?

Our findings

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

People's needs were met through good organisation and delivery.

Planning personalised care to meet people's needs, preferences, interests and give them choice and control

- Care plans were very detailed, for example, one person's plan explained exactly how they preferred to be supported with personal care and dressing. Plans included details such as, making sure they had support to put their slippers on and having a fleece blanket placed over their legs.
- Staff were knowledgeable about the people they supported. They were aware of their preferences and interests, as well as their health and support needs, which enabled them to provide a personalised service. A relative told us, "The service is so responsive, they will come straight out if medication needs to be put on the medication sheets. They are really good."
- Care plans included people's personal information, people's routines and support needs. They were up to date and reviews took place regularly with people. A staff member told us, "The level of detail in the care plans is great. I always know the best way to care for someone and if the plans require an amendment I just let the team at the office know and they make the required changes really quickly."
- People had individualised lists of care activities in their care plans and staff recorded at each visit that tasks had been done.
- People's ability to communicate was recorded in their care plans, to help ensure their communication needs were met.
- Where it was part of someone's support plan, staff supported people to access activities and facilities in the community. A health and social care professional told us, "The management team has always been flexible and prepared to try any service option that improves the support provided for vulnerable people. I am continually impressed by the level of creativity Prestige shows to adapt situations to manage risks and support care plans that empower patient choice."

Improving care quality in response to complaints or concerns

- There was an appropriate complaints management system in place. Complaints were handled in the correct way and a response was sent in a timely manner.
- A complaints register was in place that included details of the complaint and action taken, which provided oversight to the management team.
- Staff were aware of how to manage complaints. They told us that the management team took complaints seriously and this would be reviewed and investigated. A health and social care professional told us, "There have been the inevitable occasions of a delayed care visit or unhappy relative but these instances have been few and they have always been communicated timely and transparently."
- People and relatives told us they knew how to raise complaints. One person told us, "I have the number for the office, I would just ring them if I needed to, someone always answers the phone. A relative told us, "Any issues we have had had been sorted at the office straight away, no complaints here."

End of life care and support

- The service was not currently supported anyone coming to the end of their lives. However, the management team assured us that they would continue to support people if they were able to meet their needs and would provide specialist training for staff as required.

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

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

- The service had a registered manager in post. A registered manager is a person who has 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 was a positive culture where staff and management took pride in the care and support that they provided. A relative said, "The management team are great. They run a really reliable service."
- The management team worked well together to ensure the day to day running of the service, clear contingencies were in place to cover absences. Staffing levels were supported by the director and registered manager who were working to support people and care staff as required. A staff member told us, "The registered manager is brilliant and makes sure no call is missed so people aren't let down. I think because the management team are so great with the staff we don't mind doing extra work when it's required."
- People's confidential information was kept secure at the registered office.
- The registered manager was aware of their responsibility to report events to the CQC by statutory notifications.

Planning and promoting person-centred, high-quality care and support; and how the provider understands and acts on duty of candour responsibility

- The registered manager was a competent leader whose clear vision and ethos was visible throughout the service. The registered manager was supported by a field care manager (deputy), a supervisor and a branch assistant and they all shared an enthusiasm and passion for providing people with high quality, person centred care.
- Care staff were positive about their workplace and complimentary about the support they received from the management team. A staff member said, "This is by far the best place I have worked in terms of management support, I can always rely on out of hours support from the on-call manager and the support from the office is really impressive."
- People, relatives, staff and health and social care professionals spoke very highly of the registered manager. Comments included, "[Registered manager] is wonderful", "[Registered manager] is absolutely amazing. You can rely on them to always do the right thing", "[Registered] manager is amazing. [They] know each person that uses the service well, and exactly what their needs are." "[Registered manager] is a highly competent manager." "[Registered manager] doesn't expect staff to go that extra mile, they ask, and we do it because we all work as a team" and, "I have never been shown such respect [registered manager] they will do anything to help me."

- In 2017 Prestige Nursing Limited, Shrewsbury achieved 'branch of the year' in recognition of their achievements in compliance, recruitment and staff retention. The registered manager travelled to Florida, USA to collect their award at the 'one world, one dream – a world of caring' awards ceremony. The registered manager was accompanied by the Prestige 'staff member of the year' who was also from the Shrewsbury branch. The staff member had been chosen to receive this high accolade in recognition of the exceptionally caring and effective support they had given to people since they started working with Prestige Nursing Limited, Shrewsbury in 2010.

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

- Staff were seen to be actively engaged and involved with the organisation. Staff groups met frequently and the management team met with staff regularly to support them in their role. A staff member told us, "I feel really well supported, the management team are really responsive and helpful at all times. There is always someone at the end of the phone that you can rely on."
- The registered manager told us they have a committed group of staff that work well together. They told us, "We are so lucky to have such dedicated staff that go above and beyond for people. We treat them well and they work hard to help us run a reliable service."
- Without exception staff told us they felt valued by the management team and a range of rewards were regularly awarded to staff. One staff member told us, "We have a 'staff member of the month' award with prizes and often receive cards and boxes of chocolates from the management team to recognise our efforts."
- Feedback from stakeholders was gathered by post, email, online or over the telephone regularly and the findings analysed and fed into action and improvement plans for the service.
- Prestige Nursing Limited, Shrewsbury actively supported several local community charities. This included sponsoring 'circus starr', which last year paid for children with disabilities and their families to attend a fun filled day with the circus and its performers. Other community charity work and events took place with the local church, the local children's unit and Macmillan cancer support. The service often held fundraisers within the local community.
- At a national level Prestige Nursing Limited supported the rights and welfare of older people by working with the charity 'independent age'. This organisation is made up of volunteers that provide a service to the elderly that includes offering them advice on care and benefits, a free befriending service to target loneliness and isolation and campaigns for a fair deal in policy and practice for the people aged 65 and over.
- Prestige Nursing Limited provide excellent support to staff and operate a free and confidential helpline support for any issue, work or non-work related, for example, financial concerns or bereavement. The service also offered up to five face-to-face counselling sessions that staff can access to support their wellbeing.
- People, relatives and staff could access the support of the 'admiral nurse' employed by Prestige Nursing Limited, Shrewsbury. The nurse was a specialist in dementia and gave expert practical, clinical and emotional support to families living with the condition.

Continuous learning and improving care

- Visits were carried out in people's homes by the management team which enabled them to obtain feedback from people and check the environment, equipment's, medicine management and safety.
- Spot checks were carried out to check staff performance on service delivery and approach when supporting people. Outcomes of spot checks were discussed with staff along with further learning and development. A relative told us, "I have seen the managers come out to carry out spot checks on the staff, it is so reassuring to know staff are monitored and well supervised."
- Audits were carried out weekly, monthly and annually to check that systems around medicines, care plans

and training were robust. This meant there was a culture of continuous learning and people received effective care at all times.

- Prestige Nursing Limited, Shrewsbury worked with local adult care services to develop '2 carers, 1 car' which is the only service in the area to provide support to people needing a call overnight. A staff member from the team told us, "I work on the night team and we visit people during the night for many reasons; someone might need to be repositioned in bed, or might require medicine or personal care, or we just pop in to check people are alright." The registered manager showed us evidence that the success of this project had resulted in a significant reduction in hospital admissions and ambulance call outs in the area.

Working in partnership with others

- Records showed that staff communicated effectively with a range of health care professionals to ensure that the person's needs were considered and understood so that they could access the support they needed.
- The service acts to bridge gaps in domiciliary care to allow patients to leave hospital as soon as they are medically ready. A health and social care professional told us, "There are countless potential barriers and risks in coordinating a patient's transition from hospital to home. Prestige Nursing, Shrewsbury has surpassed all of my expectations in fulfilling this role. Prestige have embraced a discharge to assess culture and their commitment to high standards is a big part of why this work has been successful."