

Nightingale Social Care Ltd

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Inspection report

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Ratings

Overall rating for this service	Inspected but not rated
Is the service safe?	Good ●
Is the service well-led?	Good ●

Summary of findings

Overall summary

About the service

Nightingale Social Care Limited is a domiciliary care agency providing personal care to 75 people at the time of the inspection.

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

People were safely cared for while being supported by Nightingale Social Care Limited. Staff were trained to provide safe care and identify and report any safeguarding concerns. Risks were assessed, and staff followed guidance to safely support people. Staff were recruited safely and attended calls to people in their own homes on time and stayed for the duration of the call. Medicines were safely managed.

We have made a recommendation about recording medicines support where staff remind or prompt people to take their medications.

The management team were well thought of and there was effective management oversight of the quality and safety of the service. A range of audits and checks were undertaken to ensure continuous improvement of the service. Feedback about the service was consistently positive.

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 03/06/2019 and this is the first inspection.

Why we inspected

This service had not been inspected since it was registered. As a result, we undertook a focused inspection to review the key questions of safe and well-led only. We reviewed the information we held about the service. No areas of concern were identified in the other key questions. We therefore did not inspect them.

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?

Good ●

The service was safe.

Details are in our safe findings below.

Is the service well-led?

Good ●

The service was well-led.

Details are in our well-led findings below

Nightingale Social 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 Care Act 2014.

Inspection team

This inspection was undertaken by an inspector and 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.

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 was registered. We sought feedback from the local authority and professionals who work with the service. The provider was not asked to complete a provider information return prior to this inspection. This is information we require providers to send us to give some key information about the service, what the service does well and improvements they plan to make. We took this into account when we inspected the service and made the judgements in this report.

During the inspection

We spoke with 11 people who used the service and eight relatives about their experience of the care provided. We spoke with five members of staff including the director, registered manager and three care workers.

We reviewed a range of records, including medication administration records (MAR's), care records, as well as information relating to the health and safety, management and oversight of the service.

After the inspection

We continued to seek clarification from the provider to validate evidence found.

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 for this newly registered service. This key question has been rated good. This meant people were safe and protected from avoidable harm.

Using medicines safely

- Medicines were safely managed, and people received their medicines in line with the prescriber's instructions. Detailed assessments of medicines support were recorded, and staff were trained to safely administer medicines.
- Minor improvements were needed to the provider's procedures for recording when staff prompted or reminded people to take their medicines. Although staff recorded when they had prompted a person to take their medicines, records did not specify which medicine they had prompted for.
- We recommend the provider considers current guidance on recording medicines support where staff are prompting or reminding people.
- The provider assured CQC this concern had not impacted on people's safety.

Systems and processes to safeguard people from the risk of abuse

- People were safe while being supported by Nightingale Social Care Ltd. One person said, "Yes (I feel safe), staff are reliable, trustworthy and very kind. They look after me, it is reassuring to know someone is coming in."
- Discussions with staff confirmed they understood how to protect vulnerable adults from abuse and the management team were clear about their responsibility to report safeguarding incidents to the local authority.
- There had been one recorded safeguarding concern since the service began operating. We saw procedures had been followed to promote people's safety.

Assessing risk, safety monitoring and management; Learning lessons when things go wrong

- Risks to people's health and safety were assessed and management plans were put in place to support people to remain safe.
- Risk assessments were regularly reviewed.
- The provider had systems in place to ensure accidents and incidents were recorded, investigated and reviewed to identify any learning which may have helped to prevent a reoccurrence. At the time of inspection, there had not been any recorded accidents or incidents since the service began operating.

Staffing and recruitment

- Staff were recruited safely and had the appropriate pre-employment checks in place before employment commenced.
- People confirmed call schedules were well-managed and they received support from the same core group of staff, which prompted good continuity of care. People commented, "Normally I get between three or four

carers. The regular ones make a huge difference and I have a rapport with them" and "Staff are friendly and nice. I get two or three staff and I know their names."

Preventing and controlling infection

- The provider had a policy and procedure in place for controlling the risk of infection spreading. Staff confirmed they were provided with Personal Protective Equipment (PPE) such as masks, gloves and aprons to use when supporting people in line with infection control procedures.

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

- The service was well-led and staff at all levels were clear on their roles and responsibilities to monitor quality and safety of care delivered. Feedback about the registered manager and director was overwhelmingly positive. People confirmed they were well cared for.
- Staff told us they felt supported by management. They told us they were encouraged to undertake training and develop their skills.
- There was an open and positive culture conducive to learning and improving care. Staff told us they felt part of a team.

Continuous learning and improving care; 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 committed to continually improving the service with the provider. They had effective audits and quality assurance systems in place. These had been fully implemented and covered all aspects of service delivery.
- The provider had a comprehensive set of policies and procedures. We saw these were up to date and regularly reviewed. With the exception of the service's medicines policy, they reflected current legislation and good practice guidance. These were readily available to staff.
- The provider assured CQC they would take steps to address our concerns about their medicines policy.
- The registered manager understood their requirements to notify CQC of all incidents of concern, including serious injuries, deaths and safeguarding alerts.
- The registered manager understood their role and responsibilities in relation to the duty of candour. This is a set of expectations about being open and transparent when things go wrong.

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

- Feedback was sought from people and relatives and responses had been positive.
- The provider was keen to improve the outcomes for people within their community and ensured people were supported by staff who could meet people's communication, spiritual and cultural needs.
- The registered manager worked in close partnership with Barnsley Metropolitan Borough Council and external stakeholders to maintain and improve standards of care.

