

Professional Nursing Services Limited

Professional Nursing Services Limited - 25A White Horse Court

Inspection report

North Street Bishops Stortford Hertfordshire CM23 2LD

Tel: 01279507077

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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: Professional Nursing Services Limited is registered to provide nursing and personal care to people who live in their own homes. At the time of our inspection nursing care was not provided and four people received support with personal care in their own homes.

People's experience of using this service:

- We were unable to speak directly with people who received support due to the complex conditions people lived with and the circumstances in which they were supported.
- We obtained feedback about the services provided from people's relatives and the staff team that provided people's care.
- We received positive feedback about the care and support received.
- Everyone we spoke with during this inspection told us they were happy with the care and support provided by Professional Nursing Services Limited.
- Staff promoted people`s privacy and dignity and their choices were respected.
- Care and support was delivered in a personalised way by staff who knew people`s likes, dislikes and preferences.
- Risks to people`s well-being and health were assessed and reviewed to ensure they were safe and protected from the risk of harm.
- Staff received training and had their competencies assessed to ensure they had the skills and knowledge required to meet people`s needs effectively.

Relatives told us staff were always on time. They felt staff were well trained and met people's needs.

- Staff used effective infection control measures to protect people from the risk of infections. appropriate equipment was in place where needed for people to receive support in a safe way.
- People had opportunities to access the community where possible and pursue interests.
- Relatives we spoke with and staff confirmed the registered manager was approachable, supportive and placed people at the centre of the care and support delivered.
- Complaints were responded to appropriately.
- Feedback received from people and relatives was used in a constructive way and lessons were learned to ensure improvements were made.
- The registered manager who was also the provider used effective audits and governance systems to check the quality and safety of the care people received.

Rating at last inspection: Good (report published 27 January 2016).

Why we inspected: This was a planned inspection based on the rating at the last inspection. At this inspection the service remained rated Good overall.

Follow up: We will continue to monitor intelligence we receive about the service until we return to visit.

The five questions we ask about services and what we found

We always ask the following five questions of services.

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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?	Good •
The service was 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.	



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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: The inspection was carried out by one inspector.

Service and service type: Professional Nursing Services Limited is a domiciliary care agency. It provides personal care to people living in their own houses and flats in the community. It provides a service to older adults.

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 small and the manager is often out of the office supporting staff or visiting service users. We needed to be sure that they would be in.

Inspection site visit activity started on 23 January 2019 and ended on 25 January 2019. We visited the office location on 24 January 2019 to see the manager and office staff; and to review care records and policies and procedures.

Before the inspection: We were unable to speak directly with people who received support due to their

complex conditions some of them lived with and the circumstances in which they were supported. However, we obtained feedback about the service. We also spoke with three relatives. we reviewed information we held about the service including statutory notifications. Statutory notifications include information about important events which the provider is required to send us.

During the inspection: We looked at care plans relating to two people and reviewed records relating to the management of the service. the registered manager and the staff development manager.

After the inspection: We spoke with five staff and reviewed information sent by the provider requested during the inspection.



Is the service safe?

Our findings

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

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

Systems and processes to safeguard people from the risk of abuse.

•Staff received training about safeguarding people from harm. Staff demonstrated their knowledge with identifying and reporting abuse. Staff knew how to raise concerns, both internally and externally. One staff member said, "I would report any concerns to the office."

Assessing risk, safety monitoring and management.

•Identified risks to people's health, welfare or safety were appropriately managed to keep people safe. People's care plans contained risk assessments for people and the environment. Risk assessments were reviewed and changed when people`s needs changed. For example, one person's mode of transport had recently changed, this was risk assessed appropriately to ensure the person was kept safe.

Staffing and recruitment.

- •Safe and effective recruitment practices were followed to make sure that all staff were of good character and suitable for the roles they performed. All the necessary pre-employment and identity checks were completed to ensure best practice.
- •There were sufficient numbers of staff available to meet people's individual support and care needs. Staff confirmed they received enough travel time and attended calls at the required times. One relative said, "The time keeping is good, if there is a problem they will let us know." Another person said, [Staff] are there on time, you could set your watch by [staff]."

Using medicines safely.

•Staff received training for safe administration of medicines. Documentation relating to medicines were checked monthly to ensure best practices were followed.

Preventing and controlling infection.

•Staff had access to appropriate equipment when providing personal care to ensure infection control was managed safely. The registered manager told us where appropriate they completed regular spot checks and these spot checks included cleanliness of the environment. One relative said, "The house is always spotless."

Learning lessons when things go wrong.

•The registered manager monitored the service to ensure improvements were made and lessons were learnt. At the time of the inspection there had been no incidents. The registered manager commented, "We haven't had any incidents." However, the registered manager monitored the service to ensure people received appropriate care and support.



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.

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

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 found that the registered manager and staff were working within the principles of the MCA where necessary and appropriate to the needs of the people they supported. Staff confirmed they obtained people `s consent before they offered any support. One staff member said, "Choice is very important, I always give people choices, so [people] can decide what they want." However, although the registered manager worked with the family and the service users to provide care in their best interest, mental capacity assessments were not in place. The registered manager told us they would address this as a priority.

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

•People received an initial assessment to ensure their support needs could be met. The registered manager said, "We complete a pre-assessment to ensure we can meet people's needs." Care plans were reviewed annually and when people's needs changed to ensure appropriate care and support.

Staff support: induction, training, skills and experience.

- •Staff completed an induction programme during which they received training relevant to their roles. One staff member said, "The induction training was very good, and we get regular training." The registered manager confirmed they completed spot checks to ensure staff were working in line with best practice.
- •Staff had received training in areas such as safeguarding, health and safety and medicines. Staff were able to verbally demonstrate their knowledge. One relative said, "Staff have the correct training."
- •Staff received 'one to one' supervisions, they had the opportunity to review and discuss their performance. One staff member told us, "We have supervisions and the [registered] manager turns up and spot checks us."
- •Staff told us that the office staff were approachable. They confirmed they had the opportunity to attend meetings and staff we spoke with felt they had a voice and felt the registered manager listened to them. One staff member said, "Communication is good, [office staff] listen to what we have to say." The registered manager told us, "Staff pop in to the office on a weekly basis and are always talking with us. They do not

need to wait for a supervision to speak with me."

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

•Staff confirmed they supported and encouraged people to eat a healthy balanced diet where this was required. One staff member said, "Yes, we support people to eat healthy choices." The registered manager worked closely with one person who required support with maintaining a healthy weight. They had worked with the relative and were supporting them with healthy food options.

Staff working with other agencies to provide consistent, effective, timely care.

•Staff were able to identify people's changing needs and contacted people`s GP's when required.

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

•We saw that the service worked with other care professionals such as dieticians and social workers to ensure people's health needs were met.



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.

Good: Relatives confirmed people were supported and treated with dignity and respect.

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

- •Relative's told us that support and care was provided by staff in a kind, respectful way. One relative said, "[Staff] are kind and caring, we feel comfortable with [staff] in our home."
- •Staff developed good relationships with people they supported. People received care and support from regular staff, this ensured people knew who was coming to deliver their care.
- •Staff supported people to continue to follow their faith and religious beliefs. For example, staff supported one person to attend church. They told us, "[Person] really enjoys going."

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

- •The registered manager ensured people's views were sought. This was achieved by regularly visiting people to ask for feedback about the care they received. The registered manager said, "I contact clients weekly to ensure they are happy with the care and support they receive." people completed annual surveys, and these were positive in the responses to the care and support they received.
- •People received reviews of their care and support. We found people where possible were involved with their assessments with their family members support. One relative said, "We have reviews of the care plan, I have to be involved. [Name] can make it clear what they want to do but can't do forward planning. [They] are offered day to day choices."

Respecting and promoting people's privacy, dignity and independence.

- •Relatives confirmed the communication was good and staff always had time to sit and chat. The registered manager was passionate about people receiving care that supported their needs and was delivered in a way that promoted their independence and respected their wishes. One staff member said, "I always explain what I am doing and check that it's ok." Staff we spoke with understood the importance of people's privacy and dignity.
- •Staff promoted people's independence and treated them with respect. One relative said, "Staff don't rush they are good at managing [name] they understand [them] well." Another relative said, [Staff member] has a good relationship with [person]." One staff member commented, "I have worked with [name of person]. We know [their] routine and [name] loves routine, it's important for them."
- •Relative's we spoke with felt positive about the staff that provided care and support. One relative said, "We

are really happy with the care."



Is the service responsive?

Our findings

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

Good: People's needs were met through good organisation and delivery of people's care.

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

- •The registered manager reviewed and documented people's care regularly to ensure they received appropriate support.
- •People received an initial assessment to ensure their support needs could be met. The registered manager said, "We complete a pre-assessment to ensure we can meet people's needs we look at risks they might have." Staff we spoke with understood their roles and responsibilities.
- •People were supported to access the community where possible. We saw people were supported to follow interests such as attending church, going swimming and days out. People were also supported with indoor activities.

Improving care quality in response to complaints or concerns.

•There was a complaints procedure in place. People were aware of how to make a complaint should they need to. People told us they were very happy with the care and support they received. One relative said, "It's a good service, we have no complaints." We noted complaints received were responded to in line with the provider's complaints policy.

End of life care and support.

•The registered manager confirmed that no service users were receiving end of life care at the time of the inspection.



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.

Good: The service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care. □

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

- •Relatives felt the service was well led and they felt listened to. The registered manager was open and transparent and had good communication with staff and service users. One relative said, "I can contact [registered manager] at any time. I get on well with all the staff."
- •Staff were positive about the registered manager and felt there was strong leadership. One staff member said, "[Registered manager] is very supportive." Staff confirmed they could contact the registered manager at any time.

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

•The registered manager had an overview of the service and was aware of people's needs. There were systems in place to check and monitor the quality of the service. For example, there were systems that identified when staff training was due, or staff yearly driving licence checks were required. Staff we spoke with understood their roles and responsibilities. These were discussed at one to one meetings to ensure best practice.

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

•There were opportunities for people, their relatives to share their views about the quality of the service provided. The registered manager sought people's views weekly and completed annual surveys to ensure they had an overview of how people felt about the care and support provided. Staff confirmed they had the opportunity to attend meetings but could talk with the registered manager at any time.

Continuous learning and improving care.

•The registered manager had an overview of the service and ensured staff had the skills to meet people's needs. We saw that where people's needs changed care plans were reflective of the person's needs. Staff understood the importance of communication and reporting any changes to people's needs.

Working in partnership with others.

•We saw evidence of working with other professionals to support peoples care needs such as social workers, dieticians an GP's.