

Exhilaro Ltd

Princess Homecare

Inspection report

Princess Place
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Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

About the service

Princess Homecare is a small domiciliary care service providing personal care to people in their own homes. 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 our inspection there were five people using the service.

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

Risks to people's safety had been assessed and plans were in place to mitigate risks identified. These plans were kept under review. Systems were in place to make sure people had their medicines as prescribed and any help needed was recorded in their care plans.

Staff understood their responsibilities to safeguard people and knew how to report any concerns. People and their relatives told us they felt safe using this service. There were enough staff available to make sure there were no missed visits. Staff had been recruited safely and received ongoing support from the management team.

Staff tested for COVID-19 when they were working and had plenty of personal protective equipment. Staff had been given guidance on good infection prevention and control safety measures throughout COVID-19. The registered manager kept up to date with changing guidance and cascaded changes to the staff team weekly.

Quality monitoring systems were in place which supported the provider to check quality and safety across the service. People and relatives were able to feedback on care provided in care reviews and with surveys.

Staff worked in partnership with a range of healthcare professionals to make sure people's health needs were met. The service also had good links with the local authority teams and knew where to go for advice and guidance.

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 4 January 2018).

Why we inspected

This inspection was carried out as part of our inspection schedule.

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?

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.

Princess Homecare

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

This inspection was carried out by one inspector.

Service and service type

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

Registered Manager

This service is required to have a registered manager. A registered manager is a person who has registered with the Care Quality Commission to manage the service. 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.

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

Notice of inspection

This inspection was announced. We gave the service 48 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 the last inspection. 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 one person who used the service and three relatives about their experiences of care and support received. We spoke with three members of staff, the assistant manager and the registered manager.

We reviewed two people's care plans and risk assessments, medicines records, two staff recruitment files, quality monitoring records and COVID-19 risk assessments.

After the inspection

We continued to validate evidence found. We reviewed documents relating to the management of the service such as business continuity plans, training information, health and safety risk assessments and a variety of policies and procedures. We contacted three professionals for their feedback about the service.

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 good. At this inspection the rating for this key question has remained good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People and their relatives felt safe using the service. Comments included, "Staff are very reliable, I am very happy with them. They are very good to [person]. Extremely kind and caring. It feels safe to have [staff] in your house" and "I don't think I could live at home safely if I did not have the support."
- Staff received safeguarding training and updates as needed. Staff understood what their role was in relation to safeguarding people and how to report any concerns. One member of staff told us, "I would report to the manager in the office and voice my concerns to [manager], if it wasn't dealt with, I would call [CQC] or the local authority."
- Systems were in place to make sure any concerns were reported to the Local Authority safeguarding teams.

Assessing risk, safety monitoring and management

- Systems were in place to assess, monitor and mitigate risks to people.
- People had personalised risk management plans which gave detailed guidance on how to support people and mitigate risks. These were reviewed when needed.
- Risk management covered a wide range of areas including falls, moving and handling and skin integrity. The provider used a nationally recognised tool to assess risks to people's skin.

Staffing and recruitment

- People were supported by sufficient numbers of staff. The service was small and had a stable staff team who ensured people had the continuity of care they needed.
- The registered manager said recruiting new staff had been a challenge but there was no impact on the people currently using the service. For example, there had been no missed visits.
- People were being cared for by staff who had been recruited safely. The required pre-employment checks had been carried out.

Using medicines safely

- People had their medicines as prescribed. People's needs in relation to medicines support were recorded in care plans, which included whether staff needed to help to order or collect medicines.
- Medicines administration records seen were completed in full with no gaps in recording. The registered manager carried out regular medicines audits to monitor quality and safety in medicines administration.

Preventing and controlling infection

- Policies and procedures had been updated to reflect working safely during COVID-19. Staff had been

updated with current guidance and given stocks of personal protective equipment (PPE).

- The registered manager had put into place risk assessments for people and staff for COVID-19. Where people and staff were at increased risk there were safety measures in place.
- Staff tested for COVID-19 prior to starting their shifts with a lateral flow test.

Learning lessons when things go wrong

- Systems were in place to learn from incidents, accidents and complaints. The registered manager said they were always looking to improve the service and take action to make changes where needed.

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 good. At this inspection the rating for this key question has remained 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

- People and relatives were complimentary about the care and support received. Comments included, "We are very pleased with [staff], they are extremely helpful. We are very grateful" and "They [staff] are very helpful, they do all I ask them to do."
- People were being cared for by staff who enjoyed their work and understood person-centred values. Comments from staff included, "I absolutely love it, could not think of doing anything else, I love helping people" and "I love it, if I can make someone smile then that is my job done. Person-centred care is about supporting people with their choices, I always give people choices, never assume anything."
- People and relatives told us staff were reliable and consistent. One relative said, "I do get the same staff, it is either one or the other, you get a continuity. They have never missed a visit."
- Daily records we reviewed had been completed in a respectful way. Staff had recorded the care provided and demonstrated they knew people well.

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

- There was a registered manager in post who understood their responsibilities and regulatory requirements. A staffing structure was in place and staff understood their roles in the team.
- People, relatives and staff told us the service was well managed. Comments included, "[manager has been good, [name] has come out to see me and check, sometimes just a text or phone call asking 'how are you?' and 'I think we are getting a very good service from them.'"
- Quality monitoring systems were in place and used to check all areas of the service. This included audits and quality surveys. In the most recent survey 100% of people using the service said they would recommend it to others.
- During COVID-19 the service had adapted and reviewed quality monitoring to reduce management time spent out of the service. The registered manager told us they were reviewing systems again to make further changes as government guidance changed.
- The registered manager was continually looking for new ways to develop the service. They attended external webinars, training events and forums. Consideration had been given to moving to electronic care records. The registered manager told us they were reviewing what systems they had and how these could be improved.

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

characteristics

- People, relatives and staff were involved in the service. People were asked for their feedback and any areas for improvement were actioned. People had care reviews which enabled them to share what was working well and what needed to change.
- Staff were able to share their views in a variety of ways. Staff had supervisions and were able to contact the management or their supervisors at any time if needed. One member of staff told us, "I have a senior carer as a supervisor, they are brilliant. If I had concerns with things, I go to them."
- Staff told us the provider cared about their wellbeing and provided support. One member of staff told us, "I get messages every week asking how I am, checking on how I feel, it is lovely."

Working in partnership with others

- The service worked with various healthcare professionals to make sure people's health needs were met. Staff referred to GP's, community nurses and occupational therapists when needed.
- The registered manager told us they had a good relationship with the teams at the local authority. During COVID-19 they had worked with the local public health team to keep up to date with guidance. The registered manager told us they had "amazing support" from the team and really appreciated all the help given.