

Pathfinders Community Support Limited

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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

This was an announced inspection that took place on 4 July 2018, follow up phone calls were made to one person who used the service and staff.

Pathfinders Community Support Ltd provides personal care and treatment for adults living in their own homes. At the time of our inspection visit five people were using the service. Not everyone using Pathfinders Community Support Ltd received a regulated activity. The CQC only inspects the service being received by people provided with 'personal care', help with tasks related to personal hygiene and eating. Where they do, we take into account any wider social care provided.

This was the first inspection of the service since they were registered on 7 November 2013. At this inspection we found evidence to support the rating of good.

A registered manager was 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.

Staff had the appropriate knowledge and skills they needed to provide safe and effective care to the person using the service. Staff knew how to keep the person safe and followed the guidance and information detailed in the person's care plan and risk assessments.

Staff were employed in sufficient numbers to support the person and treated the person with care and compassion and ensure their dignity was preserved at all times.

Staff assisted the person to access the community, this included seeing relevant health care professionals and shopping for and assisting to prepare and support their healthy eating regime.

The registered manager and staff used the knowledge they gained from supporting the person to review and update the person's care plan so that they could respond to the person's changing needs.

Staff worked closely with health and social care professionals to ensure the care offered was in the best interests of the person. The registered manager provided on-going support to staff through day to day contact and supervision.

The provider had implemented a quality assurance system to ensure that the person who used the service had good quality care and support. The registered manager undertook a range of audits to ensure staff were provided personalised care that centred on the safety and welfare of the person being supported.

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.

Staff worked with the person to promote their safety by providing care and support reflective of their needs.

Staff recruitment checks were in place to protect people from receiving personal care from unsuitable staff. Staff administer medicines in line with company policies and ensure people take medicines regularly.

Is the service effective?

Good ●

The service was effective.

Staff had the knowledge and skills they needed to support the person safely and effectively. Staff had completed training essential to providing safe care.

The person was encouraged to make choices and decisions about their lifestyles, and staff sought consent before commencing personal care.

Is the service caring?

Good ●

The service was caring.

The person received care and support from a small group of staff, which encouraged a caring and supportive relationship to be established.

Information about the service was made available for those using the service, which included information about the development of their care plan. The person's views about their care and support had been sought and used to develop their care plans.

Is the service responsive?

Good ●

The service was responsive.

The registered manager had liaised with the person and health

and social care professionals to develop a care plan and support the person in their home. The person's care plan had been reviewed to reflect changes in the person's needs.

The provider had developed a complaints procedure which was provided to those using the service.

Is the service well-led?

Good ●

The service was well led.

The provider was also the registered manager. They had a clear vision with regards to the service they wished to provide.

The registered manager oversaw the day to day management of the service, which included audits to assess the quality of the service being provided.

Pathfinders Community Support Limited

Detailed findings

Background to this inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection was planned to check whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

This inspection took place at the office on 4 July and phone calls were made to one person and staff on 1 August 2018; both days were announced. The provider was given 48 hours' notice because the location provides a domiciliary care service and we needed to be sure that someone would be in the office.

This domiciliary care agency provides personal care to people living in their own houses and flats and specialist housing. It is registered to provide a service to people with mental health problems, dementia, learning disabilities or autistic spectrum disorder, older people and people who misuse drugs and alcohol.

The inspection team consisted of one inspector.

We reviewed the Provider Information Return (PIR). This is a form that asks the provider to give some key information about the service, what the service does well and improvements they plan to make.

We looked at information received from local authority commissioners. Commissioners are people who work to find appropriate care and support services for people and fund the care provided.

We reviewed the provider's statement of purpose. A statement of purpose is a document which includes a standard required set of information about a service. We reviewed the notifications we had been sent. Notifications are changes, events or incidents that providers must tell us about.

We spoke with one person who received the service, the registered manager and two support staff.

We looked at records relating to all aspects of the service including care, staffing, and quality assurance. We also looked at one person's care records.

Is the service safe?

Our findings

People were safeguarded from abuse. When asked if they felt safe the person said, "I see the same staff, they're here three times a day, they're good people."

Staff we spoke with had been trained in protecting people from abuse and understood their responsibilities to report concerns to the registered manager when necessary. Staff were aware of whistleblowing procedures, where staff may need to report concerns to relevant agencies such as the police or social care staff had any concerns not been acted on by the management of the service.

The provider's safeguarding and whistleblowing policies (designed to protect people from abuse) were in place. These informed staff what to do if they had concerns about the safety or welfare of any of the people using the service.

Risks within the person's home had been assessed and risk assessments were completed to inform staff and reduce the impact of any identified risk. The registered manager explained how they visited the person within their home to complete an initial assessment of them and their home environment prior to care commencing. The registered manager said that a copy of the service user guide (SUG) was left following the meeting. The SUG is a document that contains contact and other information about the care agency. The person confirmed receipt of this document, but was unsure about the visit prior to care commencing. We saw risk assessments that informed staff how to protect the person from identified issues in the environment such as kitchen equipment, hazardous substances and tripping risks. Staff gave us examples of how they ensured people's safety, for example by making sure their home was secure. Other risk assessments were in place to protect the person when taking their medicines.

We saw that staff recruitment practices were secure and in place. Staff records showed that before new members of staff were allowed to start work, employment reference checks had been made with previous employers or persons known to the staff member. Checks had also been made with the Disclosure and Barring Service (DBS). DBS checks help employers to make safer recruitment decisions and ensure that staff employed were of good character. All staff records we viewed had a DBS and other required documentation in place. Staff were employed in suitable numbers to assist the person with their chosen activities and reflected the diversity of the local population.

Staff administered medicines on behalf of the person. The person said, "They give me my tablets (medicine) every day." The person explained to us they preferred the staff to assist them with all their medicines to ensure they got them at the correct time and amount.

We saw evidence and staff confirmed that they had been trained to administer medicines safely and support people to take their medicines. There was a medicines administration policy in place for staff to refer to and assist them to provide medicines safely to people. One member of staff said, "We are trained to stay with people to ensure they take their medicines, some are forgetful and may not get their proper amount."

Staff understood their responsibilities for raising concerns around safety and reporting any issues to the management. Incidents and accidents were recorded and analysed by the registered manager to identify any trends so that action could be taken to prevent any re-occurrences. The registered manager told us that any lessons learnt from incidents would be shared with the staff team to ensure people remained safe.

Is the service effective?

Our findings

The person confirmed their needs were assessed prior to them using the service. The person said, "They are brilliant, whatever they do [for me] they are fantastic." The assessment process was in line with current legislation and standards and used additional information from a social care professional. This enabled the provider to ensure they could meet the person's needs and had the staff with the right skill mix to provide the care and support. The person's personal preferences, social interests, cultural and spiritual wishes, as well as physical and emotional needs were all documented in the assessment paperwork.

Staff we spoke with confirmed the training they had undertaken and said this gave them the ability to care for the person they visited. Records showed staff had completed an induction as well as other training courses related to people's health and to ensure their safety. Staff we spoke with confirmed their training was related to the 'Care Certificate'. These are training standards for staff that upon completion should provide staff with the necessary skills, knowledge and behaviours to provide good quality care and support.

Staff were regularly supervised and had their competency to provide effective care assessed by the registered manager. This ensured the care and support the person received was of a good quality and reflective of staff training and the company policies and procedures.

The person told us they were independent with most aspects of daily living. They told us they were accompanied to go shopping for goods to prepare their own meals, where previously they relied on pre-prepared meals. The person said, "They [staff] help me cook my meals, I feel a lot healthier now." The person confirmed staff met their preferences, cultural and dietary needs. Staff explained how they assisted the person and suggested different ways of how to produce meals. The staff employed mirrored the cultural diversity of the person and had shared vision of how they wanted to care and support to develop.

The person was supported to live a healthier life and was supported to maintain good health by attending regular medical appointments. The person said, "I have a community nurse and consultant, if I have an appointment they [staff] accompany me."

The person told us they were independent in most aspects of daily living, but required some staff assistance occasionally. They also told us they had applied for their flat to have the bath removed and a shower to be fitted. They felt this would improve their independence.

The Mental Capacity Act 2005 (MCA) provides a legal framework for making 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 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.

The provider had a MCA policy in place which set out how staff were to meet legal requirements with regards

to the MCA. Staff were trained in the MCA and understood their responsibilities to protect people and alert other agencies if they felt a person's rights were being compromised.

Staff understood that people had capacity unless this was proven otherwise. This is in keeping with the MCA. The registered manager told us if it appeared that someone might lack capacity, they would ensure a mental capacity assessment was carried out. Dependant on the person who was receiving the care, a relative or friend could also be involved, but only when the person gave their approval or did not have capacity to provide detailed information.

Staff we spoke with staff they were aware of their role and responsibilities in promoting people's decision making, and were able to tell us how they supported the person to make decisions consistent with their needs. For example, staff had suggested changes to the person meal regime as they were buying the same frozen pre-prepared meals each week. The person confirmed and staff told us they always asked for permission before offering care and support.

Is the service caring?

Our findings

The person told us they had developed a caring relationship with staff since they commenced receiving a service from Pathfinders Community Support Limited. The person said, "Whatever I need, they are always there, they're 100% really good." They confirmed they were visited by a regular staff group, which they were informed about in advance. We spoke with the registered manager who told us there was a small group of staff that had got to know the person well, and through this have been able to develop a strong bond that has assisted in the person's development.

The person told us that they were involved in making decisions about their care. They told us they could decide what they wanted to do in advance so they could plan the care of their pets around other supported caring tasks. Any decisions made were documented and reviewed regularly. The registered manager had a good understanding when people needed support from an advocate and information was available for people if required. An advocate is a person who speaks on behalf of a person, who may need support to make their views and wishes known.

Staff told us how they were trained to recognise and preserve people's privacy and dignity. They told us that they closed windows, curtains and doors to ensure their dignity was preserved. One staff member added it was important to cover people up when offering personal care, which helped protect their privacy.

The person's file was stored securely. Staff had access to relevant information to support the person as needed. Staff were trained and understood how to keep people's information confidential and only shared on a need to know basis.

The registered manager was aware of changes needed to comply with General Data Protection Regulation, (GDPR) that relates to how people's personal information held by the provider is managed. A confidentiality policy was in place and staff were trained and regularly reminded to use the confidentiality process.

Is the service responsive?

Our findings

Information gathered about the person had been used to develop a detailed care plan. The person said, "I have seen my care plan [name] read it out to me." The care plan included information about the person's health needs, the support that was required to ensure they were met safely and the support network of the person. The care plan detailed achievable goals which the person agreed to, and recognised this was to aid their health and overall positive well being.

The plan was regularly updated in response to the person's changing needs. This showed the registered manager was responsive in reviewing the plan to reflect the person's needs.

The registered manager was aware of the new accessible information requirement. The Accessible Information Standard is a framework put in place from August 2016 making it a legal requirement for all providers to ensure people with a disability or sensory loss can access and understand information they are given. The service could not provide information about ways to make sure people had access to the information they needed in a way they could understand it, to comply with the Accessible Information Standard (AIS). The AIS is a framework put in place from August 2016 making it a legal requirement for all providers to ensure people with a disability or sensory loss can access and understand information they are given. Care plans did not include a section about people's communication needs and an assessment of whether they had any special needs. The registered manager said that work would be done to comprehensively carry this out.

The person told us they had no concerns about the staff or service and that they would be confident to speak with the registered manager or friends who would act on her behalf about any issues. The person said, "I would speak to [named] at Pathfinders, or call my social worker."

Staff told us the person could express if they were unhappy about any aspect of their care and had in the past contacted the registered manager. Staff added they would make changes dependant on the person's needs at the time.

The registered manager told us they had received no complaints about the service or staff. The provider had developed their own complaints procedure which was included in the service user guide, which was provided to the person on the service commencing. This included the complaints policy and contact details of the local authority.

The registered manager said people were supported to plan for their final wishes, when appropriate. Currently people who used the service had not begun contemplating this part of their care plan.

Is the service well-led?

Our findings

The service had a registered manager who was also the company nominated individual. They had a clear vision about the service and how they wanted it to develop in the future. The registered manager said they wanted to expand the service, but did not want it to grow too quickly because that might impact on the quality of care provided.

The person using the service knew who the registered manager was and said they visited regularly to ensure they were satisfied with their care. The person said, "They call (telephone) and make sure I am ok."

The registered manager told us as the service was small they undertook regular visits to support the person and staff. They added that when staff were performing caring duties, they took the opportunity to visit and oversee them to ensure they were wearing the proper uniform and used their personal protective equipment appropriately. They said they also took the opportunity to look at the care notes made by the staff. This meant they could directly oversee the quality of the service provided.

Records showed that the registered manager carried out audits of the service to ensure the staff were performing their duties efficiently and safely. Staff had regular supervision meetings. Staff supervision is used to advance staff knowledge, training and development with meetings between the management and staff group. That benefited the person using the service as it helped to ensure staff were well-informed and able to care and support a person effectively. The registered manager showed us the plan of supervision meetings for the staff. These were examples of a well-led service.

Staff told us the registered manager ensured the culture at the service was open and transparent and they were positive about the leadership of the service. They also told us the registered manager was approachable and supportive and acted on suggestions made. Staff felt when they had issues they could raise them and felt they would be listened to. One staff member told us, "The [registered] manager is open and responsive and around if you need to talk with them."

Staff told us they felt valued and respected by the registered manager. They told us they liked working for the service and felt supported by the registered manager. One staff member told us, "If I have a query I contact [named] they always call me back."

Staff we spoke with told us that they would recommend the service if a relative of theirs needed domiciliary care, as they rated the care provided as very good.

We saw the registered manager held regular staff meetings, which were used to inform staff of changes to people's care. They also provided staff with support in providing consistent and high quality personal care for people.

We saw that the registered manager had a business continuity plan in place. That ensured the business would continue to operate if, for example, staff could not use the current office premises for any reason.

The registered manager told us that they were aware of their responsibility to submit notifications to the Care Quality Commission (CQC). A notification is information about important events that the service is required to send us by law in a timely way.

The person said, "She [registered manager] is really good, when I feel anxious they told me just to ring them, and it calms me down."

The provider works with the local authority and healthcare staff to provide a supportive environment for the person who received care and support.