

Staffing Plus Ltd

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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

About the Service

Staffing Plus provides personal care for one person who lives in their own flat within a specially adapted building. The service is registered to provide support for older people and younger adults. An application was made following the inspection to include Mental Health and Learning Disabilities and Autism to their registration. At the time of the inspection one person was using the service.

The service has been developed and designed in line with the principles and values that underpin Registering the Right Support and other best practice guidance. This ensures that people who use the service can live as full a life as possible and achieve the best possible outcomes. The principles reflect the need for people with learning disabilities and/or autism to live meaningful lives that include control, choice, and independence. People using the service receive planned and co-ordinated person-centred support that is appropriate and inclusive for them.

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

People felt they were safe and relatives raised no concerns over how staff cared for their loved one. Staff knew how to escalate issues and concerns and were aware of potential risks when providing support. Staff used correct equipment, such as gloves and aprons when assisting people. Accidents and incidents were managed appropriately.

Staff received an effective induction and were prepared for their role. Staff had received training and felt able to support people confidently. People felt that staff supported their individual needs and requirements. People received food and drinks as required and were supported to attend any medical appointments. People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible and in their best interests; the policies and systems in the service supported this practice.

People felt staff were caring towards them. People were given choices and were able to make their own decisions. Staff supported people to be independent and ensured that people's privacy and dignity was maintained.

People felt involved in the development of care plans and daily support. Care plans provided staff with information about people's needs and preferences and how they would like these to be met. A complaints procedure was in place and people knew how to raise concerns.

People, relatives and staff thought the service was managed well. The registered manager was described as being available to people. Systems were in place to monitor the delivery of the service.

The service applied the principles and values of Registering the Right Support and other best practice

guidance. The outcomes for people using the service reflected the principles and values of Registering the Right Support by promoting choice and control, independence and inclusion. People's support focused on them having as many opportunities as possible for them to gain new skills and become more independent.

Rating at last inspection

This was the first inspection since the provider registered on 03 March 2016.

Why we inspected

This was a planned inspection based on the previous rating.

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.

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?

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.

Staffing Plus Ltd

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

The inspection was undertaken by one inspector.

Service and service type

This service 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. 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. We sought feedback from the local authority and professionals who work with the service. We used the information the provider sent us in the provider information return (PIR). This is information providers are required to send us with key information about their service, what they do well, and improvements they plan to make. This information helps support our inspections. We used all of this information to plan our inspection.

During the inspection-

We spoke with one person who used the service, one member of care staff and the Registered Manager/Provider. We reviewed a range of documents and records including the care records for one person, two staff files and training records. We also looked at records that related to the management and

quality assurance of the service.

After the inspection

We spoke with one relative to gain their views on the service.

Is the service safe?

Our findings

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

This was the first rating for the service and at this inspection this key question was rated as Good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People and relatives told us staff provided safe support. One person told us, "Of course I feel safe, I have been here a long time." A relative said, "I would say that [person] is safe, from what I see."
- Staff were aware of their responsibilities to report safeguarding concerns. One staff member told us, "There is a safeguarding flowchart on the wall. I know how to follow it. I would pass any concerns onto the local authority or CQC."
- Staff were able to describe what they would do in the event of an emergency situation and said that they would contact the emergency services in the first instance.
- We saw that safeguarding concerns had been reported appropriately.

Assessing risk, safety monitoring and management

- Risks to people were assessed and these included, but were not limited to, personal hygiene maintenance, safety within the home and community and finances. There was also a missing persons protocol in place and staff knew how to follow this. We saw that risk assessments included actions taken to maintain the safety of people using the service.
- Checks were carried out on the facilities and equipment, to ensure they were safe. There was a building repairs risk assessment completed, in addition to fire safety risk management and checks on electrical equipment. There was a plan in place for emergency evacuation of the building and staff were aware of any support people would require.

Staffing and recruitment

- People and relatives told us there was enough staff on duty to meet their needs. A person said, "I am happy there are enough staff." A relative told us, "I am not really sure, but when I do visit they [staff] always seem to be around." A staff member told us, "There are enough staff, we don't have a problem."
- We saw that the staffing rota for previous weeks reflected the levels of staff that we were told about during the inspection.
- Records confirmed required recruitment checks had been completed before staff commenced work, these included references, a work history and a police check which ensured potential staff were suitable to work with vulnerable people.

Using medicines safely

- People using the service did not require assistance to take medicines, but felt that they staff would assist them if there ever came a point they needed support.
- Staff had received training to enable them to administer medicines.

Preventing and controlling infection

- People and relatives told us the home was clean and hygienic. One person said, "It is hygienic and clean." A relative shared, "I haven't had cause to think it isn't hygienic."
- Staff told us they had access to protective personal equipment such as gloves and aprons to prevent the spread of infections.
- We found that regular checks were made of the communal environment by the registered manager to ensure that the area was safe.

Learning lessons when things go wrong

- The registered manager discussed how one person cared for had complex needs and they had worked alongside professionals to learn how best to support the person in a very complex situation.
- Staff were aware of how to support people in relation to health and safety.

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.

This was the first rating for the service and at this inspection this key question was rated as Good. This meant people's outcomes were consistently good, and people's feedback confirmed this.

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

- Information was taken on people's needs prior to them using the service and the registered manager and staff were able to talk about people's background and care needs in depth.
- One person told us, "They [staff] ask what they need to know and I tell them."
- We saw people's protected characteristics, as identified in the Equality Act 2010, were considered within their assessments. This included people's needs in relation to their gender, age, culture, religion, ethnicity, disability and sexuality.

Staff support: induction, training, skills and experience

- People and relatives told us they felt that staff were knowledgeable and able to meet their needs.
- One person told us, "They [staff] understand [my condition] they know how to meet my needs."
- Staff told us they received an effective induction. The registered manager told us that staff were given time to complete the care certificate as part of their initial training. This is an agreed set of standards that sets out the knowledge, skills and behaviours expected of people working in the care sector.
- Staff told us they received regular supervision and this was an opportunity to discuss their role and personal wellbeing.
- We saw that comprehensive training was in place and staff were up to date with training. Recent training included, first aid, infection control, safeguarding and equality and diversity.

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

- People told us they enjoyed the food they received, one person said, "I enjoy the food, the staff help to teach me how to cook and encourage me to eat healthily." A staff member told us, "If [person] wasn't eating this would be noticed and we would contact the appropriate professionals."

Staff working with other agencies to provide consistent, effective, timely care and supporting people to live healthier lives, access healthcare services and support

- One person told us, "If I wasn't well I think the staff would get the doctor, they encourage me to see the doctor when I don't feel well." A relative said, "As professionals I would expect staff would get medical help if it was needed. I think they would."
- We found that people attended all healthcare appointments as required. They also visited the dentist and opticians and staff arranged appointments and supported them to attend. Oral health was considered as part of people's care plans.

Adapting service, design, decoration to meet people's needs

- People lived in flats, which were personal to their own needs and preferences. One person told us, "This is my place, I have my things here." We saw that people had their own belongings around them in their home.

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.

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. Where people may need to be deprived of their liberty in order to receive care and treatment in their own homes, the Deprivation of Liberty Safeguards (DoLS) cannot be used. Instead, an application can be made to the Court of Protection who can authorise deprivations of liberty. We checked whether the service was working within the principles of the MCA.

- Staff had a good understanding of mental capacity and the impact this legislation had on their role. We saw that where there had been questions about a person's level of capacity and understanding, the appropriate professionals had been consulted.
- People confirmed staff asked their permission before providing support. One person told us, "They [staff] always ask my consent and knock my door."
- Staff gave us examples how they would seek consent from people. One staff member said, "I always ask [person] before offering any assistance. They have capacity and live in their own home, so it is only right."

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.

This was the first rating for the service and at this inspection this key question was rated as Good. This meant people were supported and treated with dignity and respect; and involved as partners in their care.

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

- People and relatives told us they were respected and treated well by the staff. A person said, "The staff support and respect my beliefs". A relative told us, "I believe that staff support [person] as much as they can. They probably go above and beyond with this and know that it is something that is extremely important to [person]."
- One person told us that staff gave them their time and said, "When I need them they are there, if I don't want them they understand this."
- Staff told us how they had time to spend with people and were able to speak with us about people's likes and dislikes. One staff member told us, "We spend quality time with [person]. We have keyworker sessions when they feel like it and we chat when person wants to".

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

- People told us how they were able to make choices regarding their daily life, this included clothing, meals, personal belongings and how people wanted their care to be delivered. A staff member told us, "[Person] is fully able to say what they want and we listen."
- The registered manager had an understanding of when advocacy services would be required and how to access these services for people.

Respecting and promoting people's privacy, dignity and independence

- People and relatives told us staff provided respectful and dignified support. One person said, "I am given my privacy absolutely and they [staff] keep my dignity." A relative told us, "As fair as I know [person] is given privacy and dignity. I don't think [person] would stand for it if they weren't and they have never said anything of concern."
- We found that people were encouraged to be independent and were supported by staff to prepare their own meals and tidy their home.
- People were supported to maintain and develop relationships with those close to them. We found one person had requested to move to be closer to family and had been assisted by the provider.

Is the service responsive?

Our findings

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

This was the first rating for the service and at this inspection this key question was rated as Good. This meant people's needs were met through good organisation and delivery.

Planning personalised care to ensure people have choice and control and to meet their needs and preferences

- We found that the registered manager had taken detailed historical information prior to people moving into their property to ensure that the service was fully able to meet the person's needs.
- People told us they were involved in discussing what care they required and that they were invited to reviews of care.
- People were supported by consistent staff who knew them well and were knowledgeable about their support needs. One person told us, "I have been here long enough to know the staff well, I don't have a problem with them."
- We saw that staff acknowledged people's cultural and religious backgrounds and supported them as far as possible.

Meeting people's communication needs

Since 2016 onwards all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard (AIS). The standard was introduced to make sure people are given information in a way they can understand. The standard applies to all people with a disability, impairment or sensory loss and in some circumstances to their carers.

- The registered manager understood their responsibility to comply with the Accessible Information Standard (AIS). Information could be made available in large print or alternative languages if required.
- Where people required specific information, such as the complaints policy the registered manager told us this would be given in a manner to suit the person's understanding.
- Information on people's communication needs was identified in initial assessments and care plans.

Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities that are socially and culturally relevant to them

- We saw that people had regular activities they took part in within the local community and were able to access these independently, however if they required staff support this would be provided.
- People were encouraged to have goals in life and one person was being assisted by staff to find a job or to consider adult education.
- Relatives told us that people were supported to maintain contact with family as far as possible.

Improving care quality in response to complaints or concerns

- People and relatives knew how to raise concerns and felt that staff would be responsive. One person said, "I would just tell them [staff] if I was unhappy, they would do something about it." A relative told us, "If I needed to I would call the manager, we have arranged to meet up in the near future just to talk through

some general things."

- We saw that there was a complaints process in place and any concerns or complaints were dealt with effectively.

End of life care and support

- No one using the service was receiving end of life care, however the registered manager informed us that staff knew people well enough to be able to put a specific plan together anytime one may be 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.

This was the first rating for the service and at this inspection this key question was rated as Good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

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

- We saw that feedback was sought from people. One person told us, "I have been asked to complete a few questionnaires." A staff member told us, "We mainly take feedback through our keyworker sessions where we ask regularly what people think of the care and if they would change anything." We saw an example of this where records showed that one person had thanked staff for assisting them with their finances.
- We saw that meetings for staff occurred periodically and staff told us they found such meetings an opportunity to voice any issues or opinions they may have. Staff informed us that the registered manager was responsive to any information shared.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

- One person told us the registered manager was supportive and said, "I get the support I need from [registered manager's name] this place is well led." A relative told us, "I haven't found any problems with [registered manager's name]."
- Staff told us they felt the registered manager was responsive and open to them and provided support where it was needed. One staff member said, "This is a good place to work, staff are supported and the morale is good."
- The registered manager was able to speak knowledgeably about the service and informed us of how they were looking for opportunities to improve the service.

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 understood their responsibilities in relation to the duty of candour regulation and we found they had been open and transparent when reporting any incidents.
- We found that learning was taken from any incidents and that this was shared with staff, so they were aware of any actions they needed to take.
- Staff understood the need to raise concerns and issues and one staff member told us, "I would do it [whistle-blow] if needed." A whistle-blower exposes any information or activity that is deemed incorrect within an organisation.

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

- Systems were in place to monitor the service provided to people, this was in the form of various audits and reviews, which were carried out in a timely manner. These audits included, but were not limited to; key worker session recordings, staffing, incidents, policies and health and safety. We saw that actions were taken where required and the registered manager had a good overview of the service.
- The provider had met their legal responsibilities by promptly informing CQC of notifiable incidents.

Working in partnership with others

- We saw that the registered manager and staff worked in partnership with people's relatives, health professionals, local authority departments and various groups and services within the community to ensure that people were supported appropriately.