

Woodlands Premier Care 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

This inspection took place on 11 November 2016 and was announced.

Woodlands Premier Care provides personal care for people in their own home. There was one person using the service when we inspected and the provider was the registered manager. 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 and associated Regulations about how the service is run.

We were only able to speak with one relative and have therefore not used quotes within this report and the examples we have given are brief because we respect people's right to confidentiality.

People were safe when staff were in their home providing care and received care from staff that protected them from the risk of potential abuse. People's individual risks had been recorded and reviewed. Staff told us they looked at the plans in place to understand how to provide safe care. There was a small staff team who provided care at the times people had wanted it. People's medicines were managed by staff who had been trained and supported to administer these.

Staff received regular training and were knowledgeable about their roles and responsibilities. They had the skills, knowledge and experience required to support people with their care and support needs. Staff understood the need to gain people's consent to care and treatment before providing any care or assistance.

Staff told us they knew people they supported and got to know them well. Care plans were in place that provided the level of personal information that people had wanted to share. The plans provided staff with guidance about people's preferred support and people were involved in making decisions about their care.

People's care needs were met by staff who knew them well. People were supported by staff that promoted and maintained their dignity, whilst respecting their levels of independence.

People received care from the registered manager so they were always able to talk with them about any concerns if needed. Relatives said they were also able to contact them out of working hours when needed for advice or assistance. Staff felt they were able to speak with the registered manager and provided feedback on the service. The registered manager told us they kept their knowledge current and provide staff with input and direction about the levels of care they expected. Regular checks were completed to monitor the quality of the care that people received, these included reviewing records and observing staff practices.

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.

People received care and treatment from staff that understood how to keep them safe and free from the risk of potential abuse.

There were enough staff to meet their care needs and support people with their medicines.

Is the service effective?

Good ●

The service was effective.

People's needs and preferences were supported by trained staff who had up to date information about people's needs. Information in the care records was consistently followed. People had been able to make their own decisions.

Staff had contacted other health professionals when required to meet people's health needs.

Is the service caring?

Good ●

The service was caring.

People received care that met their needs. Staff took account of people's individual preferences, whilst maintaining dignity and respect.

Is the service responsive?

Good ●

The service was responsive.

Care plans were in place that showed people's care and support needs. Staff also knew about people's interests, personal histories and preferences.

People were able to approach the registered manager and there were regular opportunities to feedback about the service.

Is the service well-led?

Good ●

The service was well-led.

Staff were supported by the register manager. There was open communication within the staff team and staff felt comfortable discussing any concerns.

Regular checks were completed to monitor the quality of the service provided.

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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 on 11 November 2016 and was 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. One inspector carried out this inspection.

Before the inspection, we reviewed the information we held about the service and looked at the notifications they had sent us. A notification is information about important events which the provider is required to send us by law.

We spoke with one relative where their family member received care. We spoke with two care staff and the provider who was also the registered manager.

We looked at one record about people's care and completed daily notes, charts about medicines, staff training records and quality audits that the registered manager had completed.

Is the service safe?

Our findings

People were comfortable with staff coming into their home and had no concerns about their safety while they were with them. People had confidence in the provider and would raise any concerns about their safety with the staff.

All staff told us they would report any concerns to the registered manager and were confident that these would be dealt with. The registered manager explained how they would raise any safeguarding concerns with the local authority as required.

People's personal needs had been risks assessed and regularly reviewed by the registered manager to look at the risks. The registered manager also provided care to and told us this was an opportunity that no other areas of risks required further assessment. The recorded risks were available for staff to read and staff told us they followed these plans to help ensure the care they provided was completed with the least amount of risk to a person. The registered manager had reviewed the person's home to look at potential risks for staff working there when providing care for a person. For example, looking at trip hazards or how staff entered the home.

People had regular staff who always arrived promptly and stayed for the agreed time. Staff told us they were committed to their work and never missed a call and there were enough staff to care for people. The registered manager also provided care to people and this had supported the staff team. The registered manager told us they would only accept new people care packages if they had the availability to meet them.

People's medicines were administered and recorded by staff. Staff were aware of the types and reasons for people's medicines and possible side effects to look for. People told us and records showed that staff knew how to administer the medicines and the amounts needed. The records were checked monthly by the registered manager, to identify any missed doses or recording errors.

Is the service effective?

Our findings

Staff knew people's individual needs. All staff told us they felt the training gave them confidence when delivering care and that it matched people's needs. The training had been specific to each person and care staff were trained and assessed individually by a trainer who was knowledgeable about the persons care needs.

All staff told us that the registered manager supported them in their role with regular meetings and supervisions and they felt valued. Staff were confident that communication was good and as a small team were always in contact with each other. Staff told us that any problems or questions they were able to ask the registered manager.

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. We checked whether the service was working within the principles of the MCA. People had consented to their care and treatment and were supported in developing their care plans. Records showed the person's needs and wishes had been included. For example, the amount of personal care and the level of assistance needed.

We spoke with staff who were clear that people had a choice when receiving personal care and support. The registered manager was clear that all people using the service were able to make choices and said, "All our clients are able to provide their consent".

People were supported in looking after their health and the staff responded to any changes. Staff were able to support people on medical appointments when needed and were involved in any changes to care made at these appointments.

Records showed that people had been supported by the registered manager to have access to other professionals in support of the healthcare needs. For example, hospital visits which were essential to a person care needs.

Is the service caring?

Our findings

People received the care they wanted and needed. People had been able to make decisions and were listened to by staff. All staff spoke in a caring way about the people they supported. They were able to tell us about people's preferences, current needs and their histories. Relatives we spoke with told us they knew all the staff and felt they provided good care and support. People had the opportunity to talk about their lives and personal interests with staff, and they enjoyed their company. They told us the registered manager was considerate about what information was recorded and they were able to choose how much detail they provided. Staff told us that people had their right to privacy and they would only chat about things the person felt comfortable with.

Staff told us people were involved in their day to day care choices which they felt promoted their independence. We saw that care plans detailed how to help people to maintain their independence and the day to day difficulties that may arise. For example, how a person's needs may change depending on how they felt that day.

Staff provided examples of how they made sure they maintained people's dignity and respect. For example, seeing how they preferred personal care to be provided and where able leaving the person to promote their privacy.

Care plans were developed with the person and reviewed every six months or sooner if there were changes. People had been involved in these reviews and any changes suggested were recorded and action taken. People's preferred routines or preferences were followed which suited them. The registered manager discussed the care people wanted before when they first started using agency to make sure they were able to meet their requests.

Is the service responsive?

Our findings

People were involved in making decisions about their care and support needs. People's families had been involved where agreed to support their care needs. For example, their partner who they felt could support and advise them in the care plans.

All staff we spoke with knew people's needs and provided examples of how people who had a particular illness may be affected and the actions to take if something changed. All staff knew how people's supporting equipment worked and how to monitor and manage any changes that would impact on a person's health.

The care people received was recorded after each visit which the registered manager collected and reviewed at the end of each month. People also told us that any changes to their needs were updated quickly and were communicated to staff. The registered manager told us any immediate changes were communicated to staff. Staff confirmed changes were sent thorough to them in person, or where this was not possible with a telephone call or text message.

We looked at one person's care records which showed they had been updated regularly or when a change had been required. All relatives and staff we spoke with felt the records were current and reflected what care people needed. Records showed staff people's preferred way to provide their care and how to support the individual. For example, the steps needed for each personal care task. People's care was reviewed regularly by the registered manager. Relatives were happy to discuss any changes that they would like in their family members care when needed.

All people we spoke with told they had not had any cause to make a complaint. However, they knew the registered manager and staff well and would be happy to let them know of any concerns or issues. Whilst no complaints had been recorded in the last 12 months processes were in place to investigate and respond to people.

Is the service well-led?

Our findings

People and their relatives were involved and had been asked for their feedback about the way the service was managed. People and their relatives knew and had regular and direct contact from the registered manager. Relatives told us that this agency suited their family members needs well.

All staff we spoke with told us that the registered manager was approachable, accessible and felt they were listened to. Staff told us they were able to tell management their views and opinions at staff meetings. One staff member said, "Good management, good team".

The registered manger was pleased that all their staff worked as a team to ensure that people received good care. The registered manager had checked and reviewed the service provided. They had reviewed the care notes that staff had completed when providing personal care. They checked to ensure the care provided matched the care plans. For example, they had checked that two staff had attended when needed and all tasks had been completed.

The registered manager worked regularly alongside staff and took that opportunity to review the quality of the service provided. Staff told us they often worked with the registered manager which helped to ensure they provided care in line with people's needs and preferences.

The registered manager considered they worked well alongside health care professionals. They had approached them when they needed guidance or advice. Any involvement or guidance from other professional had been recorded. They told us they kept their knowledge current with support of other external professionals. They used information from the Social Care Institute for excellence, the Care Quality Commission (CQC) and Skills for Care. They felt these supported them in guidance about best practice and any changes within the industry.

People had been asked for their views about their care and had completed questionnaires about each member of staff that provider their care. The results were positive of the service and the care with no areas requiring improvement. We spoke with the registered manager about the values they expected staff to provide. They wanted to offer personalised care to people they knew and had a really good understanding of their needs. As a smaller agency the registered manager got to know people well and provide care. They told us this helped to ensure any small queries or questions were dealt with immediate and that staff knew the standard of care they expected.