

Passion Care Staffing Ltd

Passion Care Staffing Northampton

Inspection report

Unit S45, Moulton Park Business Centre
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Tel: 01604945120

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23 September 2019
25 September 2019

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Ratings

Overall rating for this service

Requires Improvement 

Is the service safe?

Requires Improvement 

Is the service effective?

Good 

Is the service caring?

Good 

Is the service responsive?

Requires Improvement 

Is the service well-led?

Requires Improvement 

Summary of findings

Overall summary

About the service:

Passion Care Staffing Northampton is a domiciliary care agency. It provides personal care to 12 people living in their own homes.

People's experience of using this service:

Medication administration records (MAR) were not always being used. We found that topical medicines were being applied to a person without appropriate recording systems being used.

Care was not always personalised. People told us that staff were frequently late in arriving to provide care. People said that staff did not always stay for the amount of time they should.

The provider had looked in to an electronic call monitoring system to monitor staff call times, but this had not been fully implemented at the time of inspection.

Audits did not always identify faults, such as MAR not being in place. Management staff were not always aware of staff being late to care calls as no system was in place to effectively monitor this.

People and relatives we spoke with told us they felt safe care was delivered by staff. Staff had a good understanding of safeguarding procedures and how to report abuse.

Risk assessments were in place to manage risks within people's lives. These assessments were reviewed and kept up to date.

Staff recruitment procedures ensured that appropriate pre-employment checks were carried out and staff were trained to support people effectively.

Staff were supervised and felt confident in their roles. When required, people were supported by staff to prepare food and had support with healthcare arrangements.

People's consent was gained before any care was provided, and they were supported to have maximum choice and control of their lives.

Staff treated people with kindness, dignity and respect and spent time getting to know them. People were supported in the least restrictive way possible.

People and their family were involved in their own care planning as much as was possible. A complaints system was in place and was used effectively.

The registered manager was open and honest, and worked in partnership with outside agencies to improve

people's support when required. The service had a registered manager in place, and staff felt well supported by them.

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 3 June 2017)

Why we inspected:

This was a planned comprehensive inspection

Follow up:

We will continue to monitor intelligence we receive about the service until we return to visit as per our inspection programme. If any concerning information is received, we may inspect sooner.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

The service was not always safe.
Details are in our safe findings below.

Requires Improvement ●

Is the service effective?

The service was effective.
Details are in our effective findings below.

Good ●

Is the service caring?

The service was caring.
Details are in our caring findings below.

Good ●

Is the service responsive?

The service was not always responsive.
Details are in our responsive findings below.

Requires Improvement ●

Is the service well-led?

The service was not always well-led.
Details are in our well-Led findings below.

Requires Improvement ●

Passion Care Staffing Northampton

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:

Passion Care Staffing Northampton limited provides personal care to people living in their own houses and flats and provides a service to older adults.

The service had a manager registered with the Care Quality Commission. This means 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:

The inspection was announced. We gave the provider 48 hours' notice because the location provides a domiciliary care service and we needed to be sure someone was available. The inspection started on 23 September 2019 by visiting the office location to review records, policies and procedures. We made telephone calls to people using the service and staff members on 25 September 2019.

What we did:

We looked at information received from the provider, such as statutory notifications about events the provider must notify us about. We also reviewed feedback from other professionals who work with the service. We took all the information into account when we inspected the service and making the judgements

in this report.

During our inspection we spoke with one person using the service, five relatives of people using the service, two care staff, the care coordinator and the registered manager. We reviewed the care records for three people using the service, and other records relating to the management oversight of the service. These included staff recruitment files, staff training and supervision records, policies and procedures, surveys and feedback from people who used the service and quality assurance audits.

Is the service safe?

Our findings

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

At the last inspection this key question was rated as good. At this inspection this key question has deteriorated to requires improvement.

This meant some aspects of the service were not always safe and there was limited assurance about safety. There was an increased risk that people could be harmed.

Using medicines safely

- Medicine administration records (MAR) were not always used. We saw that topical medicines were being administered by staff, but they did not always complete the MAR records after doing so. One person was being administered a prescribed topical barrier cream, and staff were not using the MAR to record this. The registered manager told us they would immediately begin using MAR for all forms of prescribed medicine administration.
- After the service had identified that other MAR in use had not been completed fully, actions were taken, and these records were now being completed fully.
- Staff were trained in the administration of medicines, and were confident in doing so.

Staffing and recruitment

- People and relatives told us they felt there were enough staff working for the service, however they did not always feel they could rely on staff to arrive on time.
- Most people saw the same staff consistently, although some people felt that too many staff changes took place, and they did not always know who was coming to provide their care.
- The provider had safe staff recruitment checks in place. This meant that checks were carried out before employment to make sure staff had the right character and experience for the role.

Systems and processes to safeguard people from the risk of abuse

- People and their relatives told us that safe care was provided.
- The provider had systems in place to safeguard people from abuse and they followed local safeguarding protocols when required.
- Staff had been trained to recognise abuse and protect people from the risk of abuse. They understood how to report any concerns if they needed to. One staff member said, "I would report any concerns to the manager. I have faith that it would be followed up properly, but if it wasn't, I would speak to the safeguarding team at the council."

Assessing risk, safety monitoring and management

- The provider maintained effective systems to ensure potential risks to people's safety and welfare had been considered and assessed. Clear guidelines were given to staff to manage risks associated with falls, moving and handling, and the environment.

- Both people and relatives we spoke with told us they thought that risk assessments reflected their needs accurately, and all care tasks were carried out by staff who followed procedure and understood what risks were present.

Preventing and controlling infection

- Staff were provided with personal protective equipment to prevent the spread of infection, and also received training in this area.
- People and relatives, we spoke with told us staff used the appropriate equipment when providing care to them.

Learning lessons when things go wrong

- Accidents and Incidents were monitored and action taken to address any identified concerns.
- The registered manager had been regularly visiting people to review care and ask for feedback.

Is the service effective?

Our findings

At the last inspection this key question was rated as good. At this inspection this key question remains the same.

This meant people's outcomes were good, and people's feedback confirmed this.

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

- Effective systems were in place to assess and determine people's individual needs and preferences. These were set out in each person's care plan and were reviewed regularly by the management.
- The registered manager and staff used recognised good practice and guidance to ensure that people's care was provided appropriately.

Staff support: induction, training, skills and experience

- Appropriate training was in place for all staff. This included an induction training package for all new staff. One staff member told us, "The training has been good. I had the time to meet people and shadow other staff before going out on my own."
- Staff we spoke with felt confident the training provided them with the knowledge they required to safely support people.
- Staff were supported through regular supervisions and 'spot check' visits to observe their practice.

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

- Where the provider took on the responsibility, staff supported people to eat and drink sufficient amounts. This included recording and monitoring the food and fluid intake for some people.
- Most people required minimal support in this area, but staff understood the support required and records reflected how people should be assisted with food preparation.

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

- People's healthcare requirements were supported by staff who understood their needs. Staff we spoke with told us that relatives of people supported them with healthcare most of the time, and that no current complex health care support was required of the staff team.
- Care plans contained information about people's health conditions, and how staff should support them.
- The service worked alongside other health professionals when required, to ensure people's health needs were met.

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.

When people receive care and treatment in their own homes an application must be made to the Court of Protection for them to authorise people to be deprived of their liberty.

- Systems were implemented to ensure that people's capacity was assessed, and records kept of decisions made in their best interest.
- Staff had received training in MCA and understood the importance of seeking consent from people. People were supported in the least restrictive way possible.

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.

At the last inspection this key question was rated as good. At this inspection this key question remained the same.

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 felt that staff were mostly kind and caring. One relative said, "The staff are quite delightful, they get on really well with [name]. [Name] would soon say if they weren't happy. Some people told us they had mixed experiences with staff. One relative of a person said, "Staff are mostly good, but some come along that don't know us, and aren't so good."
- Staff we spoke with felt able to provide good care, because they had the time they needed to get to know people, and were providing their care consistently. One staff member said, "The rotas I get are fairly consistent, and I get to see the same people and get to know them."
- Care plans were written in a way that enabled staff to understand people's personal needs, and provide care in a personalised manner. This included information on each person's religion, culture, social needs and communication needs.

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

- People and relatives we spoke with felt in control of the care they received, and able to make decisions about their care and express themselves. One relative said, "The staff always listen to me and do what we ask of them."
- The registered manager and staff understood the importance of involving people in decision making. We saw that meetings were held with people and their relatives when their wishes or needs changed.
- Care plans were regularly updated and were completed alongside people and their families, taking in to consideration their personal wishes.

Respecting and promoting people's privacy, dignity and independence

- People and relatives told us their privacy and dignity was always respected. One relative said, "They [staff] are always respectful towards [name]. I would certainly speak up if they weren't."
- People's information was stored securely within the office, and all staff were aware of keeping people's personal information secure.

Is the service responsive?

Our findings

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

At the last inspection this key question was rated as Good. At this inspection this key question has deteriorated to requires improvement.

This meant people's needs were not always met.

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

- People did not always feel their care was personalised to their needs. Several relatives of people we spoke with told us that care was not delivered at the time their relatives needed it. One relative said, "They consistently fail to arrive on time. They didn't show up at all today." Another relative said, "It is quite poor, the time keeping needs improving a lot. They are often an hour or so late." We raised this with the registered manager who said that an electronic call monitoring system had been purchased, but this had not yet been fully implemented due to technical difficulties. They were looking in to fixing these issues soon and launching the system, which would enable the accurate tracking of staff members on care calls.
- Care plans we looked at contained some person centred information about likes and dislikes, but this was minimal. The registered manager said they would be speaking with people and recording more person centred information to improve this aspect of the care plans.
- The registered manager and staff we spoke had a good understanding of all the people receiving support, and knew them all personally. The registered manager and care coordinator regularly made contact with people to discuss care.
- Efforts were made to personalise care where possible. The registered manager told us that one person who did not speak English as a first language, had requested a carer that spoke their language, and this was arranged for them.

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 was aware of the requirement to provide people with accessible information, but had not been required to do so for any of the people receiving support or their families.

Improving care quality in response to complaints or concerns

- A complaints policy and procedure was in place. We saw examples of recent complaints that had been dealt with and responded to promptly.
- People told us they were aware of how to make a complaint and said they were comfortable to do so.

End of life care and support

- At the time of inspection, no end of life care was being delivered. The registered manager was aware of what was required to support people who may need to receive end of life care.

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 the last inspection this key question was rated as good. At this inspection this key question deteriorated to requires improvement.

This meant the service management and leadership was inconsistent. Leaders and the culture they created did not always support the delivery of high-quality, person-centred care.

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

- Prompt and adequate action was not always taken to ensure that staff were monitored and were arriving at the time they should be for care calls. Several people told us that staff were regularly late to calls, and some calls were missed. Whilst management were aware of some staff punctuality issues, they were not always aware of these incidents.
- A sufficient system to monitor staff timeliness and take action when required was not in place. The registered manager had purchased an electronic monitoring system, but this had not been fully implemented. The registered manager told us they would be making the necessary changes to utilise the system properly and monitor and take action with staff as soon as possible.
- Issues around staff timeliness and lack of MAR for topical medicines had not been identified in any internal audits or quality checks. Other audits in place had been completed regularly and actions taken when issues were found. The registered manager told us that audits would be improved to include the checking of topical MAR, and staff punctuality.
- People and relatives we spoke with were not always confident the service was well managed. One relative of a person said, "I have raised the issue of staff not being on time with the management. They apologise, but not much has been done. They are nice people, but I'm looking for another company for [name]."
- Staff we spoke with provided positive feedback about their experiences working at the service and the support that was provided to them. One member of staff said, "The management are good, they get back to you quickly if you need support." Another staff member said, "I really enjoy my job, I get the support I need."

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

- The provider had not displayed the rating from the previous inspection of the service within the office as required. We raised this with the registered manager who immediately displayed the certificate as required.
- Staff and management were clear about their roles and understood what was required of them. Staff felt they got the support they required, and told us that managers were responsive to their needs and helped them feel confident in their roles.
- The registered manager notified the Care Quality Commission (CQC) and other agencies of any incidents which took place that affected people who used 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 was aware of the requirements under the duty of candour. The duty of candour is a set of specific legal requirements that providers of services must follow when things go wrong with care and treatment.
- Staff knew how to 'whistle-blow' and knew how to raise concerns with the local authority and CQC if they felt they were not being listened to or their concerns acted upon.

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

- People were able to feedback on the service regularly to the staff or the registered manager. People told us they often saw the registered manager and updated them on their care and fed back on any issues they might have.
- Staff meetings were held to engage with staff about current issues and update them about people's care. Staff told us they felt they were kept up to date and able to contribute to the running of the service.

Working in partnership with others

- The management team and staff worked closely with outside agencies such as the local authority and other health and social care professionals to ensure people's needs were met. This included making referrals to the appropriate professionals when people's needs changed.