

PIC 24 Healthcare Ltd PIC 24 Healthcare Ltd

Inspection report

Neepsend House 1 Percy Street Sheffield South Yorkshire S3 8BT Date of inspection visit: 09 May 2022

Date of publication: 08 June 2022

Tel: 01142795313

Ratings

Overall rating for this service Good • Is the service safe? Good • Is the service well-led? Good •

Summary of findings

Overall summary

PIC 24 Healthcare Ltd is a domiciliary care agency providing personal care to four people at the time of the inspection. 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.

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

People were safe. Staff had been trained to safeguard people from abuse. They understood the risks to people's safety and wellbeing and what they should do to minimise these. Staff were recruited in a robust and safe way to ensure they were suitable to support people. The service had infection prevention and control measures in place which were in line with current guidance. People received a consistent and reliable service, provided by regular staff with whom they were familiar.

People had the support they needed to manage and take their medicines safely. The management team reviewed any accidents or incidents involving people who used the service, in order to learn from these.

The registered manager and provider promoted a person-centred culture within the service. People's care and support was delivered in a kind and caring manner. People and their relatives were encouraged to provide feedback about the service they received, so any improvements could be identified.

The provider had quality assurance systems and processes in place to enable them to monitor and improve people's care. Staff and management sought to maintain positive working relationships with the community professionals involved in people's care.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk

Rating at last inspection and update

The last rating for this service was requires improvement (report published 7 November 2019). At this inspection we found improvements had been made.

Why we inspected

We carried out an announced inspection of this service on 16 October 2019. We found some improvements were needed and we rated the service requires improvement to the key questions of Safe and Well-led.

We undertook this focused inspection to check the provider had made improvements. This report only covers our findings in relation to the Key Questions Safe and Well-led.

For those key questions not inspected, we used the ratings awarded at the last comprehensive inspection to calculate the overall rating. The overall rating for the service has changed from requires improvement to good. This is based on the findings at this inspection.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for PIC 24 Healthcare Ltd on our website at www.cqc.org.uk.

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
Is the service well-led? The service was Well-led.	Good •



PIC 24 Healthcare 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 Health and Social Care Act 2008.

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 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. We visited the location's office on 9 May 2022.

What we did before the inspection

In planning our inspection, we reviewed information we had received about the service and feedback from the local authority.

The provider was not asked to complete a Provider Information Return (PIR) prior to this inspection. A PIR is information providers send us to give some key information about the service, what the service does well and improvements they plan to make.

We used information gathered as part of a monitoring activity that took place on 8 March 2022 to help plan the inspection and inform our judgements.

We used all this information to plan our inspection.

During the inspection

We spoke over the telephone with three relatives of people who used the service. We emailed five staff to ask a range of questions. We spoke with one care worker in person and the registered manager. We visited the office location to review written records. We looked at three people's care records. We checked records relating to the management of the service including policies and procedures and quality assurance records.

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 requires improvement. At this inspection the rating has changed to good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse; Learning lessons when things go wrong

- People were protected from potential risks of harm.
- Relatives told us their family members felt safe when they received their care and staff promoted their safety. Relatives told us, "We trust the staff to provide good safe care" and "I believe [name] receives safe care from PIC."
- Safeguarding policies and procedures were in place to support people and the staff team. The registered manager had engaged appropriately with the local authority to investigate any concerns. Staff had received training in safeguarding. Staff were knowledgeable on how to identify the signs of abuse and how to report concerns. Staff told us, "If I witnessed any incident that constitutes abuse, I would inform my manager" and "Any safeguarding would be immediately addressed and would be referred to the local authority."
- Staff understood the provider's procedures for reporting any accidents or incidents involving the people who used the service.
- Information from lessons learnt and changes to practice were shared with the staff team through meetings and supervision.

Assessing risk, safety monitoring and management

- General and individual risks were assessed and monitored.
- Care files included up to date risk assessments with guidance for staff on how to mitigate the risks.
- Staff told us they were trained how to use equipment correctly such as hoists and there were risk assessments in place around the use of equipment.

Staffing and recruitment

- There were enough suitable staff with a variety of skills to meet people's needs and keep them safe.
- Relatives of people using the service told us staff arrived on time and stayed for as long as they were needed. In cases where staff were going to be late, relatives of people using the service told us they received a phone call advising them of this. Relatives comments included, "Staff are very good they come on time, new staff are introduced and if they are running late they let us know" and "[Name] knows and likes all staff they come on time and do not rush her. It is good to have small staff team so [name] knows them all."

• Staff we spoke with said there were enough staff for them to make all the calls required. Staff told us if a person's needs changed and the person needed more support, a reassessment involving the local authority would be arranged, and extra hours would be agreed with the agency to provide additional support for the person.

• Staff files evidenced the safe recruitment of staff and included all required documentation to help ensure

people were suitable to work with people who were vulnerable.

Using medicines safely

• Medicines were managed safely. A relative told us, "Staff give [name] their medicines every day, they know what they are doing. [Name] knows all the medicines they take so they would soon realise if there was a problem."

• Managers completed regular checks of medicine administration records (MAR) to monitor administration was completed correctly. Where there had been issues, we saw evidence of this being addressed quickly.

• Staff had received training in medicine administration and had frequent checks to ensure they remained competent. Staff told us, "I have been assessed and there has been some spot checks on how I administer my medication. I am confident with my medication administration skills."

Preventing and controlling infection

- The provider had an up to date infection prevention and control policy in place which staff demonstrated good knowledge of. Relatives spoken with confirmed staff wore appropriate personal protective equipment (PPE) during visits. This was readily available both from the office and within people's homes.
- Staff had received training in the use of PPE and infection control procedures. Checks were completed by office staff to ensure compliance with this. Staff told us, "Yes I have access to PPE, and we are checked we use it correctly at our supervision meetings and spot checks."
- Staff were engaged in a COVID-19 testing regime, in line with government guidance.

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 requires improvement. At this inspection, the rating has changed to 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; Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- The registered manager and provider demonstrated an open and transparent approach and were passionate about promoting a person centred, inclusive and empowering culture.
- The feedback from relatives of people who used the service about the service and management team was very positive. Comments included, "The PIC staff are amazing. The staff support me as a relative as well as [name]," "The staff seem very experienced and I have no worries about the care and safety of [name]" and "I would definitely recommend this service, we have used three or four organisations and this has been the best, we're happy with the care."

• People and relatives told us they usually had weekly or daily contact with the registered manager and provider and so were able to provide feedback about the service very regularly. People who used the service, relatives, and stakeholders had also been asked for written feedback on how the service was being run or what could be done better to drive improvements. Relatives said, "[Registered Manager] is very responsive and will quickly address any issues, I have been asked for feedback about the service, but I have no complaints or worries," and "Any issues resolved. I spoke with the manager a few weeks ago to amend the call times so [name] wasn't going to bed too early, this was immediately addressed."

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; 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 service was managed by an experienced registered manager. Staff were clear about their roles and responsibilities and they received support to deliver a good quality service.
- The service was well run and there was a clear staffing structure. Staff were aware of their roles and responsibilities.
- Managers completed audits and checks to monitor and identify potential improvements in the safety and quality of people's care and support. These included audits on key aspects of the service, such as people's care records, staff personnel files, medicines records, safeguarding issues and accident and incident reports.
- •Spot checks and competence evaluations were completed with staff regularly. This helped the provider understand where further training, mentoring and support was required.
- Staff spoke positively of the registered manager and provider. One staff member told us, "I feel my manager is understanding, I feel listened to and I feel valued."
- The registered manager demonstrated a good knowledge in relation to the duty of candour.

• Services that provide health and social care to people are required to inform the Care Quality Commission (CQC), of important events that happen in the service. The registered manager was aware of their responsibilities to submit relevant notification appropriately to CQC.

Continuous learning and improving care

- We found the service had processes in place to continually learn from any incidents that occurred, or concerns raised. Learning points were discussed in supervisions or meetings.
- Staff told us that they could request additional training should they be supporting a person with a specific need or have a unique area of interest. The registered manager promoted a continuous learning approach and shared with us details of training sessions they were in a process of implementing.

Working in partnership with others

• The registered manager and provider worked collaboratively with the community health and social care professionals involved in people's care, to the benefit of the people who used the service. Records noted the involvement of family members and health and social care professionals in people's care.