

Tender Nursing Care

Tender Nursing Care

Inspection report

The Ryan Medical Centre
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Preston
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Tel: 01772335136

Date of inspection visit:
25 May 2016

Date of publication:
30 August 2016

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

Tender Nursing care is a long established charitable organisation. It is a small, specialised domiciliary care agency, which provides a unique overnight service for those in the community, who are severely sick and require end of life nursing and personal care. This support enables their main carers to have some periods of respite. The agency office is situated within the Ryan Medical Centre in Bamber Bridge on the outskirts of Preston. It is easily accessible by public transport and private car parking facilities are available. The registered manager had been in post for a period of 23 years.

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 of the Health and Social Care Act and associated regulations about how the service is run.

We last inspected Tender Nursing Care on 11 November 2013, when the service was meeting all regulations we assessed at that time.

This inspection was conducted on 24 and 25 May 2016. The registered manager was on duty when we visited the agency office. She provided all the records we requested in a timely manner and was co-operative throughout the inspection.

At the time of this inspection there were seven people in the community who were receiving overnight care and support from Tender Nursing Care. There were three nursing staff appointed and five care assistants.

There were thorough processes in place to keep people safe. Staff members were well trained and had good support from the management team. They were confident in reporting any concerns about a person's safety and were competent to deliver the care and support needed by those who used the services of Tender Nursing Care. The recruitment practices adopted by the agency were robust. This helped to ensure only suitable people were appointed to work with this vulnerable client group.

Assessments had been conducted within a risk management framework. This helped to promote people's safety and well-being and protect people from harm.

The planning of people's care was based on an assessment of their needs, conducted before a package of care was arranged. We found the plans of care to be person centred, providing staff with clear guidance about people's needs and how these were to be best met. Changes in individual needs were appropriately recorded. Staff we spoke with were easily able to discuss the needs of people in their care.

People were helped to maintain their independence as far as possible. Staff were kind and caring towards those they supported. Care was provided in a dignified manner and people's wishes were respected.

Records showed that staff received a broad range of training programmes and those we spoke with provided us with some good examples of modules they had completed. Evidence was available to demonstrate that supervision sessions were conducted for staff, as well as annual appraisals, which enabled them to discuss their work performance and training needs with their line managers.

Consent had been obtained from people who used the service. Staff spoken with told us they felt well supported by the registered manager of the agency.

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 

This service was safe.

Relatives felt their loved ones' were safe using the services of Tender Nursing Care. At the time of this inspection staff were deployed appropriately to meet the needs of those who were receiving care and support. Necessary checks had been conducted before people were employed to work at the service. Therefore, recruitment practices were thorough enough to ensure only suitable staff were appointed to work with this vulnerable client group.

Good emergency plans and robust safeguarding protocols were in place at the agency. Staff were confident in responding appropriately to any concerns or allegations of abuse.

Assessments were conducted to identify areas of risk, so that people were protected from harm.

Is the service effective?

Good 

This service was effective.

The staff team were well trained and knowledgeable. They were deployed in accordance with the needs of those who received care and support. Staff members had completed an induction programme when they started to work for the agency, followed by a range of mandatory training modules. Staff were supervised and appraisals were conducted.

Staff members we spoke with confirmed they had completed training in relation to the Mental Capacity Act and associated regulations. Consent had been obtained prior to care and treatment being delivered.

Is the service caring?

Good 

This service was caring.

Records showed and relatives we spoke with confirmed that people's privacy and dignity was consistently promoted. From speaking with staff it was clear that they were fully aware of the

importance of treating people in a respectful way. People were supported to remain as independent as possible.

Staff communicated well with those they supported and were mindful of their needs.

Is the service responsive?

Good ●

This service was responsive.

An assessment of needs was done before a package of care was arranged. Written plans of care were well written and person centred.

The management of risks helped to ensure that strategies were implemented and followed, in order to protect people from harm.

People we spoke with told us they would know how to make a complaint should they need to do so and staff were confident in knowing how to deal with any concerns raised.

Is the service well-led?

Good ●

This service was well-led.

The service had a quality assurance system in place and records showed that identified problems and opportunities to change things for the better were addressed promptly. As a result, the quality of service provided was continuously monitored.

Staff spoken with had a good understanding of their roles. They were confident in reporting any concerns and they felt well supported by the managers of the service.

People were provided with the opportunity to regularly comment about the service delivered. All feedback we received was very positive.

Tender Nursing Care

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 24 and 25 May 2016 by one adult social care inspector from the Care Quality Commission. The provider was given 48 hours' notice, because the location provides a small domiciliary care service, operated by a sole manager and we needed to be sure that someone would be available to provide us with the information we needed.

At the time of our inspection there were seven people who used the services of Tender Nursing Care. Due to the poorly condition of those who were using the service, it was not appropriate to visit them within their own homes. However, we were able to speak with three relatives by telephone, who were all very complimentary about the staff team and the manager of the agency. Very positive feedback was received from those we spoke with.

We also spoke with five members of staff, the registered manager of Tender Nursing Care and the chairman of the charitable organisation. We looked at a wide range of records, including the care files of three people who used the service. This enabled us to determine if people received the care and support they needed and if any risks to their health and wellbeing were being appropriately managed. Other records we saw included the personnel files of three staff members, a variety of policies and procedures, training records and quality monitoring systems.

The provider sent us a 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. The PIR provided some good information.

Prior to this inspection we looked at all the information we held about this service, such as notifications about significant events.

Is the service safe?

Our findings

Relatives we spoke with all felt their loved ones' were safe whilst using the services of Tender Nursing Care. One of them said, "They [the staff] make sure that [name removed] is totally safe before they leave."

Assessments had been conducted within a risk management framework. This helped to ensure that any areas of risk were identified and strategies implemented to eliminate or reduce the possibility of harm.

Robust safeguarding protocols were in place and staff were confident in responding appropriately to any concerns or allegations of abuse. People who used the service were protected by the emergency plans implemented by Tender Nursing Care.

We established that the turnover of staff was very low and many of those who worked for Tender Nursing Care had been in post for many years. There had been one new employee appointed since our last inspection in 2013. We looked at this individual's personnel record and found that recruitment practices were robust.

A completed application form and health questionnaire was retained on file and evidence was available to show that a thorough interview had been conducted by the registered manager of the agency and the president of the organisation. This enabled the management to obtain details about applicants' work history and suitability for the job expected of them.

All relevant verifications had been conducted before the commencement of employment such as, photographic identification, two written references and a police check, which helped to ensure that prospective employees were fit to work with this vulnerable client group. Confirmation had also been obtained from the Nursing and Midwifery Council (NMC) to verify that registered nurses were eligible to practice. This helped to ensure they had maintained their registration with their professional regulating body.

Two members of staff we spoke with talked us through the recruitment process. One said, "My recruitment was thorough. They [the agency] took up two references and checked my DBS [Disclosure and Barring Service] status."

Relatives we spoke with confirmed that staff stayed for their allocated length of time and were never late to begin their shift. One of them told us, "They [the staff] are fantastic. They never put [name removed] in any danger. I trust them whole-heartedly." At the time of this inspection staff were deployed appropriately to meet the needs of those who were receiving care and support.

The provision of care and support did not include the administration of medication, as families had taken on this responsibility and therefore we were unable to assess the management of medications.

Is the service effective?

Our findings

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 and whether any conditions on authorisations to deprive a person of their liberty were being met.

We saw that consent from people had been obtained and the documents used were very informative. These included relevant details about the individual such as, personal information, medications prescribed and any known allergies. They covered areas such as, sharing of information, access of confidential documents, care and treatment, consent for enquiry and withdrawal of consent. There was also provision for a statement from an interpreter, if this was needed.

The members of staff we spoke with told us that they had done the MCA and DoLS training on line and felt confident in safeguarding those in their care. One of them said, "If I had any concerns about the safety of anyone I would contact the manager straight away."

All successful applicants received a very detailed handbook, which contained relevant information about the agency, including all the important policies of the service such as, disciplinary and grievance procedures, terms and conditions of employment, job descriptions relevant to individual roles, codes of conduct, duty of candour, dealing with complaints, data protection and confidentiality, equality and diversity, health and safety, safeguarding vulnerable adults and whistleblowing. This helped new employees to learn more about the agency and to be fully aware of what was expected of them whilst working for Tender Nursing Care.

Records showed that new employees were guided through an induction programme, which covered areas such as, communication and attitude of staff, personal appearance, timekeeping, policies and procedures and staff training.

One member of staff told us, "I had an excellent induction and was introduced to the service users. I shadowed another member of staff to begin with." Another commented, "My induction was very useful. The new on line training is good, but some more face-to-face practical training would be useful, but I realise this could be difficult to arrange because of our working shifts."

The staff training matrix showed that a variety of learning modules had been completed. Records demonstrated that all staff had undertaken a mandatory training programme. The registered manager told us that on line training was undertaken by the staff team, as it was difficult to arrange group face-to-face learning, due to staff working different night shifts and often at short notice. However, it was evident that

beside the compulsory modules, additional topics of training, specific to people's needs, covered areas such as, catheter and stoma care, dementia awareness, person centred care, motor neurone disease, anaphylaxis, wound care, challenging behaviour, end of life care, health and safety, infection control, moving and handling, safeguarding vulnerable adults and duty of candour. We found that some training modules completed by staff had not been entered on to the master training plan. This was discussed with the registered manager at the time of our inspection and we were confident that this would be brought up to date without delay.

Supervision sessions for staff were held periodically and appraisals were conducted from time-to-time. These forms were ready to be circulated to staff for their completion, before meetings were arranged. Due to the nature of the agency the registered manager met with staff on a regular individual basis.

Is the service caring?

Our findings

One relative told us, "They [the staff] are wonderful. I could not fault them. They are excellent, just excellent and so very caring. We are so appreciative for the care and love they give. We always get the same staff. They never change. They are so dedicated." And another said, "We are extremely happy and satisfied with the services of Tender Nursing Care. The lady who comes here cannot do enough for us."

A Service User's Guide was in place, which provided people who used the service and their relatives of any relevant information about Tender Nursing Care such as, the services and facilities available to them.

We saw that the plans of care incorporated the importance of respecting people's privacy and dignity, particularly during the provision of personal care. Records showed that those receiving care and support and their families had been fully involved in planning their own care or that of their loved one. It was clear that people were supported to maintain their independence for as long as possible and that staff were fully aware of how to communicate with people in a respectful manner.

One member of staff we spoke with commented, "The continuity of care is just marvellous." Another told us, "Once we get allocated a client, we are with them right to the end."

We saw detailed reports, which had been forwarded to the registered manager every week. These provided current information about the condition of each person who used the service, so that any concerns could be followed up without delay. This was considered to be good practice.

Is the service responsive?

Our findings

We looked at the care files of three people who used the service. We found people's needs had been thoroughly and appropriately assessed by a registered nurse before a package of care was arranged. Any risks to the health, safety and welfare of people were identified at this stage of the assessment process. This helped to ensure the staff team were able to provide the care and support required by each individual. The records of one person demonstrated that the individual's GP and family had also been fully involved in the assessment of needs.

Detailed person centred plans of care had been developed from the information obtained during the pre-admission assessment process. These identified what people needed and how these needs were to be best met. We saw that specific plans of care had been developed, which provided the staff team with clear guidance about how to provide individualised care and support for people and their families during the last days and hours of life. We were told by the registered manager, relatives and staff we spoke with that the plans of care were retained within people's homes, so that those involved could refer to them, if they wished and visiting staff members could easily access the information they needed.

A robust complaints policy was in place at the agency office, which clearly outlined the procedure people needed to follow, should they wish to make a complaint. A system was in place for recording and managing any complaints received, which demonstrated that complaints were rarely raised with the provider or other relevant organisations. However, the management of a complaint received since our last inspection was thoroughly investigated and was dealt with in an appropriate manner, with all correspondence being retained in a confidential way. The relatives we spoke with told us they would know how to make a complaint, should they need to do so. One family member said, "Complain! It would never come to that, but if I needed to I would go straight to the manager."

We saw plenty thank you messages had been received by the agency, which all provided positive comments about the services of Tender Nursing Care.

Is the service well-led?

Our findings

We saw detailed reports following monthly visits conducted to people's homes by the president and the chairman of the organisation. These visits were to obtain people's views about Tender Nursing Care and to monitor the quality of service provided. Therefore, it was not necessary for people to complete questionnaires on a regular basis, as a more personal touch had been established with those who used the service and their relatives. The reports were designed in accordance with the five questions used by CQC and also included, punctuality of staff, entry procedures, introductions by unfamiliar staff and producing acceptable identification, respect, rapport, standard of care, health and safety, record keeping and staffing matters.

Board meetings were held every three months and regular trustee meetings were also arranged, with minutes being retained at the agency office. The meeting agendas were organised in a structured format, which covered areas such as, administration, planning and strategy, information governance, Director's meeting, fund raising and employment matters. The registered manager confirmed that she met with all staff members on a regular basis and this was supported by those who we spoke with and who worked for Tender Nursing Care. However, it was established that staff meetings were arranged as and when required, so that any new information could be disseminated to the staff team, but that staff could contact the registered manager at any time.

A wide range of policies and procedures were in place at the agency office, which were reviewed and updated every two years, or more often, should there be any changes in current legislation or good practice guidelines. Copies of these were issued to new staff members and included the Mental Capacity Act [MCA] and Deprivation of Liberty Safeguards [DoLS].

Evidence was available to show that the registered manager closely assessed and monitored the quality of service provided by maintaining regular contact with everyone involved with Tender Nursing Care and by continuously reviewing and updating all records and documents. She was clearly aware of people's individual needs and had a good working relationship with everyone concerned. The service continued to maintain a good level of service for those receiving care and support.

We were confident that matching service users' needs with the skills of staff was a priority for Tender Nursing Care and this was the responsibility of the registered manager, whose extensive experience of managing this agency enabled her to fully understand the qualities, skills and experience of each member of her staff team. Therefore, she was able to allocate care and support in the best interests of those who used the service.

One member of staff said, "As we work on our own it can be quite isolating, so it would be nice to have a get together occasionally, but logistically this is difficult because of the night shift patterns. The registered manager is very helpful and extremely supportive and we can ring her for a chat at any time." Another told us, "The management are very good. I have no complaints about them at all." And a third commented, "We are chatting with the manager all the time."

Comments received from staff members included, "I enjoy working for the agency. It is a lovely agency. I feel very valued"; "The management of TNC [Tender Nursing Care] are definitely very good. They contact clients and their families about us [the staff] to make sure everything is OK. We sometimes take questionnaires out for people to fill in"; "I am definitely well supported by the manager of the agency. She is always available" and "The manager is superb at her job."