

Prestbury Care Providers Ltd

Prestbury Care Providers

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

Prestbury Care Providers is a domiciliary care agency providing personal care to people in their own homes. 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. At the time of our inspection there were 18 people receiving personal care from the service.

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

People told us they felt safe when care staff visited them and the support they received from staff helped them to keep safe and manage risks. Risk assessments were conducted and measures put in place to reduce any identified risks.

People told us staff were kind, caring and thoughtful and that they benefitted from having a group of regular carers whom they knew well.

People told us staff always arrived as expected and they had a group of regular carers. There were sufficient numbers of staff to meet the needs of the people using the service. Staff were recruited safely and had appropriate training for the role.

Not everyone using the service had their medicines administered by the service. Where they did, we found medicines were administered, managed and monitored safely.

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 told us they knew how to make complaints and felt confident that the service would act on these.

All 6 people we spoke with were exceptionally positive about the support they received. People said they felt the service was well managed and communication was good. There were robust systems in place to oversee the quality of the service and ensure people received consistent high-quality care.

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

Why we inspected and rating at last inspection

This is the first inspection of this service which registered on 14 September 2022. The service has changed its

registration and this only affect the address from where the service is provided.

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?

The service was safe.

Details are in our safe findings below.

Good ●

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 responsive.

Details are in our responsive findings below.

Good ●

Is the service well-led?

The service was well-led.

Details are in our well-led findings below.

Good ●

Prestbury Care Providers

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

This inspection was carried out by 1 inspector and an Expert by Experience. An Expert by Experience is a person who has personal experience of using or caring for someone who uses this type of care service.

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 provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations.

At the time of our inspection there was a registered manager in post.

Notice of inspection

This inspection was unannounced.

What we did before the inspection

We used the information the provider sent us in the provider information return (PIR). This is information providers are required to send us annually with key information about their service, what they do well, and improvements they plan to make.

During the inspection

We spoke with 2 people who used the service and 4 relatives. We spoke with 9 staff members including the registered manager and care staff. We reviewed 3 care records and multiple records relating to the quality, safety and monitoring of the service were reviewed.

Is the service safe?

Our findings

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

This is the first inspection of the service since it changed its registration and it has been rated good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- Staff had received training in safeguarding and had a good understanding of different types of abuse and their responsibility for protecting people.
- The service identified incidences which were potentially safeguarding concerns and took appropriate action in response to these.

Assessing risk, safety monitoring and management

- People and their relatives told us the service was safe. One person said, "I do feel safe when [staff] are here, it brightens my day up seeing them first thing in the morning."
- We reviewed the care plans for three people and found that these People's care plans contained sufficient information about the risks to them and how staff could minimise these to keep people safe. The service worked well with other healthcare professionals to provide people with joined up care and ensure their wellbeing.
- One person told us the service were quick to act on concerns about their wellbeing and this led to them receiving prompt treatment for sepsis. They said, "Prestbury react, investigate and are proactive in their response."

Staffing and recruitment

- People and their relatives told us they benefitted from a group of regular care staff who they knew well. They said the staff always arrived as expected and stayed the full agreed time. One person said, "The [care staff] come on time, and they will call if they are going to be late. They will notify us if there is a change of [staff] too."
- The service carried out robust recruitment checks to ensure staff were of suitable character and background to work with vulnerable people. Staff told us that checks were carried out on the quality and standard of care practice when they first began working for the service.

Using medicines safely

- Not everyone using the service had support with their medicines. However, the service undertook an assessment at the time of taking on the care package to assess whether people required support with medicines and how this should be done.
- Where people did need support, this was clearly stated in their care records with information about how they liked to take their medicines, when, and what these were for.
- Medicines Administration Records (MARS) for 2 people using the service indicated that medicines were being administered in line with the prescriber's instructions.

Preventing and controlling infection

- Staff had access to appropriate stocks of personal protective equipment (PPE) and people told us staff wore this when they visited them. This helped to reduce the risk of the spread of infection. One person said, "They wear their tunics, gloves and aprons."
- All care staff had received training in infection control and had regular refreshers. There were also random unannounced spot checks of staff practice which checked whether staff were wearing appropriate PPE.

Learning lessons when things go wrong

- The manager had a system for analysing and investigating incidents which were analysed and investigated to identify instances where action may reduce the risk of repeat incidents.
- Care plans were updated where required in response to incidents.

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 is the first inspection of the service since its registration changed and it has been rated good in this area. 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

- The service carried out a comprehensive assessment of people's needs before they began providing care to them.
- Care was planned and delivered in line with best practice guidance. The service used well known care sector processes and procedures to assess for risk and put in place clear plans to reduce risk associated with people's care and support needs.

Staff support: induction, training, skills and experience

- Staff received a comprehensive package of training in subjects applicable to the role. Staff also had training in subjects specific to the needs of people they cared for, such as catheter care. Staff told us they felt the training was good and that they felt they had the knowledge required to care for people.
- The management team had oversight of staff competency and performance to ensure that training was effective.
- Staff told us they felt well supported by the management of the service and that they could be open, honest and transparent about their views and suggestions.

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

- Not everyone using the service had support with eating and drinking. Where they did, assessments were carried out with regard to the risk of malnutrition and choking.
- Where people needed support with eating and drinking, the level of support required was clearly set out in care records, along with their preferences. This meant staff could provide them with personalised care.

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

- The service had developed good relationships with other healthcare professionals such as district nursing teams and GP surgeries to ensure people received joined up care.
- Staff were proactive in seeking advice where they had concerns about people's health and welfare. Referrals were made to other healthcare professionals where the service thought people would benefit from their input to keep them healthy.

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 MCA 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.

We checked whether the service was working within the principles of the MCA, whether appropriate legal authorisations were in place when needed to deprive a person of their liberty, and whether any conditions relating to those authorisations were being met.

- People told us that staff gave them choices, only did as they asked and were respectful of them. A relative said, "The [staff] do everything they are supposed to do and they do it in a way that my [family member] prefers."
- The service assessed people's capacity to make decisions. People's abilities were clearly recorded in their care records and there was a focus on encouraging independence.
- People's care plans made clear how they made decisions. This meant people were supported to give consent in whatever method of communication was best for them.

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 is the first inspection of the service since its registration changed and it has been rated good in this area. 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 and respecting and promoting people's privacy, dignity and independence

- People told us the service provided by staff was caring and that staff treated them with kindness. One person said, "Being with them is like putting on a favourite, comfy pair of slippers. I feel confident with them."
- One relative told us the support their family member received from the service meant they had been able to live independently and do things they had been unable to do before. They said, "The [staff] are committed and sensible, they go over and above what we have asked them to do. They are kind, caring and there is a routine which is done very well." They also said, "[Family member] has been able to be a young independent person. They can go shopping, eat out, and go for walks in the forest. They are doing everything a young person should do."
- Care records made clear what tasks people could complete independently and what parts of tasks they needed support with. This reduced the risk of people being over supported.
- People told us staff treated them with respect and dignity. One person said, "I find them to be friendly, polite and respectful."

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

- People and their relatives, where appropriate, were involved in the planning of their care. People told us that a staff member had visited them in person to find out what support they wished for and their preferences for this. This was then written into a care plan which people were asked to sign, where able, to indicate they were happy with the contents.
- People told us they had access to their care documents in their home and were aware of the contents of these. They said they were regularly contacted by office staff to see whether anything required adjustment or review. People's comments were documented and action was taken where they wished for any changes.

Is the service responsive?

Our findings

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

This is the first inspection of this service since its registration changed and it has been rated good in this area. 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

- People's care plans were personalised and included information about their preferences, routines and how they liked their care delivered. Where people had goals, such as living more independently, these were recorded.
- People told us that the service and its staff team planned their care in a personalised way and that the times care staff visited them was based on their preferences. One person told us the service was flexible, stating that if they had an appointment they could speak to the office staff who would adjust the time of their care visit to fit around their appointment.

Meeting people's communication needs

Since 2016 all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard. The Accessible Information Standard tells organisations what they have to do to help ensure people with a disability or sensory loss, and in some circumstances, their carers, get information in a way they can understand it. It also says that people should get the support they need in relation to communication.

- People's communication needs and methods were clearly recorded in their care records. People told us the service communicated very well with them.
- People were given numerous ways to communicate their views and wishes to the service. This included surveys, receiving phone calls from the office and at care reviews.

Improving care quality in response to complaints or concerns

- There was a system in place for recording, investigating and responding to complaints. At the time of the inspection, the service had not received any complaints.
- People told us they knew how to make a complaint and could always get hold of someone at the office if they had an issue. Everyone told us they were happy with the service they received and had no complaints.

End of life care and support

- No one was receiving end of life care at the time of our visit.
- However, care plans were in place which set out people's wishes at the end of their life and how they would want to be cared for during this time.

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 is the first inspection of this service since its registration changed and it has been rated good in this area. 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; 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 and managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements;

- The registered manager had implemented robust systems to monitor the quality of the service. It was clear that these systems were effective and that there was effective oversight of the quality of the service. This ensured more consistent and positive outcomes for people.
- Positive comments about the service were made by people using the service and relatives. One relative said, "Prestbury are doing a wonderful job. It's the best care company we have had. They are very good, very professional." Another person said, "I am able to speak to the office I concerned about anything, [Registered manager] is very approachable, as are the other office staff. They all do their utmost to help."

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

- Surveys of people's views had been carried out and the results of these were all positive. People told us they also were asked for their views regularly through phone calls and at reviews of their care.
- People and their relatives told us that the service communicated well with them. One said, "They care. You can talk to them; they will listen and they communicate well with us. The communication is really good." Another person told us, "I hear from either [office staff] regularly, just to check in to see if all is OK. Communication is brilliant."

Continuous learning and improving care

- The registered manager reviewed incident records regularly, investigated incidents thoroughly and took action where required to make any changes to reduce the risk of repeat incidents.
- The registered manager had a focus on ensuring that they were able to maintain good communication and a family friendly feel with people using the service.

Working in partnership with others

- The service had good links with other outside organisations to ensure people received joined up and effective care.
- The service communicated well with organisations such as commissioning County Councils.

