

Paramount24 Healthcare Limited

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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

About the service

Paramount24 Healthcare Limited is a domiciliary care agency providing personal care in people's own homes. At the time of the inspection the service was providing care and support to 11 people.

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

The service was well run, and people who used the service were very happy with the care and support they received. The registered manager and nominated individual possessed a good oversight of the service as they were involved in people's care. Records of care delivered were full and present. We have made a recommendation about recording decisions relating to people's care and support.

Relatives told us their family members received safe care from staff who were caring and kind. People's care needs had been thoroughly assessed and care plans contained person-centred information to guide staff on how to provide effective support. Risks were assessed and plans were put in place when appropriate. There were systems in place for monitoring changes to people's needs and the management team were experienced at working with external stakeholders, such as commissioners or health and social care professionals. The service had recruitment processes in place to ensure suitable staff were employed. Staff followed safe infection control practices.

People were supported by staff who were competent and skilled. Staff were trained to administer people's medicines safely and to identify and report any safeguarding concerns. Staff asked people for their consent before providing them with any care. People who used the service 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.

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

Rating at last inspection

This service was registered with us on 24 June 2020. This is the first inspection.

Why we inspected

This was a planned inspection based on the date of registration.

Recommendation

We are mindful of the impact of the COVID-19 pandemic on our regulatory function. This meant we took account of the exceptional circumstances arising as a result of the COVID-19 pandemic when considering what enforcement action was necessary and proportionate to keep people safe as a result of this inspection. We will continue to monitor the service and will take further action if needed.

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 effective?

Good ●

The service was effective.

Details are in our effective findings below.

Is the service caring?

Good ●

The service was caring.

Details are in our caring findings below.

Is the service responsive?

Good ●

The service was responsive.

Details are in our responsive findings below.

Is the service well-led?

Good ●

The service was well-led.

Details are in our well-led findings below.

Paramount24 Healthcare Limited

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 carried out by one inspector.

Service and service type

This service is a domiciliary care agency. It provides personal care to people living in their own homes.

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

We gave the service 72 hours' notice of the inspection. We initially gave the service 24 hours' notice; however, the registered manager told us our visit would clash with contractors working at the office to move their data to a new server, which would impact on the inspection. We therefore delayed the inspection.

Inspection activity started on 6 May 2022 when we visited the service office and ended on 17 May 2022.

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. We reviewed information we had received about the service since it registered with us. We used all of this information to plan our inspection.

During the inspection

We spoke with two people who used the service and five relatives, about their experience of the care provided. We spoke with the nominated individual (provider), registered manager, two senior carers and two carers. We reviewed four people's care plans and risk assessments. We reviewed two staff files to look at the recruitment, training and supervision records.

After the inspection

We continued to seek clarification from the provider to validate evidence found.

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 this newly registered service. This key question 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

- There were systems in place to help protect people from abuse. Everyone we spoke with told us they felt safe in the company of staff.
- There was a system in place to report safeguarding concerns to the local authority, although the service had not yet had to do this. Staff had received training in safeguarding vulnerable adults and were able to tell us what they would do if they had safeguarding concerns about anyone using the service or staff.

Assessing risk, safety monitoring and management; Learning lessons when things go wrong

- Risks to people's health, safety and well-being were assessed and measures were in place for staff to reduce or remove the risks. Risk assessments were reviewed as required, such as in response to people's changing needs.
- The service had a process for recording and investigating any accidents or incidents. We saw action was taken to prevent similar accidents or incidents from re-occurring.

Staffing and recruitment

- Staff were recruited safely and had the appropriate pre-employment checks in place before employment commenced.
- Call schedules were well managed and people told us staff consistently arrived on time and completed all care tasks before they left. One person commented, "They have always been on time. I have never had to ring 'em to say where are they."

Preventing and controlling infection

- People told us staff followed correct infection control procedures, washed their hands and wore personal protective equipment (PPE) when providing personal care.
- Staff had received infection prevention and control training and additional information and guidance about how to protect themselves and service users during the COVID-19 pandemic.
- The service had good stocks of PPE, which were kept at the office.

Using medicines safely

- Medicines were safely managed. People and relatives spoken with confirmed they received their medicines in line with their prescription.
- Detailed assessments of medicines support were recorded, and staff were trained to safely administer medicines.

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 for this newly registered service. This key question has been rated good. 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;
Supporting people to eat and drink enough to maintain a balanced diet

- A full assessment had been completed before people received support from Paramount24 Healthcare Limited, which provided detailed information about people's care needs. A personalised care plan was then written.
- People and their relatives were involved in this process. They were asked to provide important information about their likes, dislikes and life history, so care was delivered in accordance with their needs and preferences.
- For people who received support with eating and drinking, people's feedback confirmed they were happy with the support they received. They told us staff prepared meals of their choice and provided them with encouragement to eat and drink enough.
- People's food preferences were recorded in their care plan, along with details of any special dietary requirements. This supported staff to cater for their needs, in accordance with their preferences.

Staff support: induction, training, skills and experience

- Staff received appropriate training and support to undertake their jobs effectively. When asked about the quality of training one staff member said, "Very good, I found it very accommodating. They made me feel very comfortable so I could ask any questions."
- Staff received ongoing support from their managers through supervision, observations and appraisals. All staff spoken with said they felt well-supported. One staff member commented, "We've had 1-1 time and we have constant informal support too."
- People and staff benefited from a highly trained and experienced management team. Both the nominated individual and registered manager were experienced professionals with qualifications in social and probation work.
- New staff received a comprehensive induction when they started working at the service.

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

- People benefitted from the management teams knowledge and experience navigating the various pathways of care to facilitate timely support from external organisations. We saw a number of examples where the registered manager supported people to increase their package of care through their commissioner.
- People and their relatives provided positive feedback about how the service supported them with their health. For example, staff supported one person to complete an exercise routine set by their

physiotherapist.

- People's care plans consistently reflected professional advice. We fed back to the management team one person's care plan did not cross-refer to the physiotherapist's care plan. The registered manager assured us they would update the care plan.
- This provider had a robust system for monitoring and recording ongoing involvement of external professionals.

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.

- People signed their care records to show they consented to their care and support, if they had the capacity to make this decision.
- Staff had undergone training in the MCA and clearly demonstrated their practical awareness of the need to gain consent before providing care. We were satisfied the service was acting within the principles of the MCA.

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 for this newly registered service. This key question has been rated good. 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's choices in relation to their daily routines were listened to and respected by staff. Relatives told us staff treated people with kindness. Comments included, "We are more than happy in terms of the care" and "Staff are unfailingly kind, they turn up on time, they do what they need to do. I can't ask for more really."
- Staff were provided with relevant information about the person, to enable them to provide personalised care.
- Feedback about the care was overwhelmingly positive. Outside professionals also recognised staff provided good care and we saw one district nurse commented in their feedback form, "Every client is treated as an individual and always treated with respect."
- In addition to the running of the service, the nominated individual and registered manager were involved in the delivery of people's care. This arrangement benefitted people as they had regular contact with the management team and changes which ordinarily required a manager to approve, happened almost instantaneously.

Supporting people to express their views and be involved in making decisions about their care; Respecting and promoting people's privacy, dignity and independence

- People told us they were involved in developing their care plans and knew their care workers well. The service also valued involvement from people's families and encouraged them to be involved in their care as much or as little as they felt comfortable with.
- We fed back to the provider that discussions with people and their relatives about their care and support should be recorded. The registered manager assured CQC they would immediately implement improvements to their record keeping practices after the inspection.
- People's care was provided in a dignified way and staff were clear about upholding people's independence.
- Staff understood the need to respect people's confidentiality and not to discuss issues in public or disclose information to people who did not need to know. Any information that needed to be passed on about people was discussed in private.

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 for this newly registered service. This key question has been rated good. 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; End of life care and support

- Care plans were person centred and included information on how people wished to receive their care and support. This supported staff to deliver care to people in accordance with their preferences.
- Care plans were reviewed regularly to ensure they continued to meet the needs of people. Staff were notified of any changes in people's care and support needs. This ensured staff had access to current and relevant information. One staff member said, "Care plans and risk assessments are good. We also update managers if we see changes are needed in people's care. I usually give managers a ring to tell them."
- People were encouraged to share their wishes for when they were nearing the end of their lives. The service worked with other health professionals within the community, such as district nurses, to provide end of life support.

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 were assessed when they started using the service and their care plans provided clear guidance to staff about how to communicate effectively with people. Policies were in place to ensure staff and people who used the service were able to access relevant information in a way they could understand.

Improving care quality in response to complaints or concerns

- Systems were in place to manage complaints and the provider's complaints procedure was given to people who used the service. It explained how people and their relatives could complain about the service and how any complaints would be dealt with.
- The service had received one complaint since they began operating. We were satisfied the provider had responded appropriately.
- People and their relatives told us they could confidently raise any concerns with staff or the management team.

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 for this newly registered service. This key question has been rated good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; Continuous learning and improving care

- The provider's systems of governance supported good service delivery and covered most areas relating to quality and safety. There were systems to ensure people's daily records and medicine administration records were checked regularly. Managers completed spot checks on staff to ensure they were providing safe care, but these were not always recorded. A system to check care plans for quality and safety issues was not yet established.
- Generally, record keeping practices were robust, and records were consistently full and present. However, decisions affecting a person's care and support were not always recorded.

We recommend the provider seeks advice from a reputable source about implementing an effective record keeping process to accurately record all decisions taken in relation to an individual's care and treatment, and includes reference to discussions with people who use the service, their carers and those lawfully acting on their behalf.

- Although we had concerns about how the provider recorded changes to people's care, we found no evidence this impacted, and feedback confirmed people and their relatives felt fully involved in all care decisions. The management team assured us they will act on our feedback after the inspection.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people; Working in partnership with others; Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- The registered manager and nominated individual encouraged a positive culture by leading by example. People told us they were supportive and approachable.
- The provider had mechanisms in place to gather feedback from people, relatives and external stakeholders. We saw the service had received positive feedback from a number of external health and social care professionals. A social worker commented, "I have nothing but positive experiences with your service." A community matron commented, "The management are responsive to suggestions regarding care... staff seem well organised and efficient."
- Staff worked in partnership with a range of health and social care professionals to ensure people's needs were met. The registered manager worked with commissioners of care, health and social care professionals and other stakeholders to ensure the quality of care was consistently good.

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 their regulatory responsibilities and understood how and when to submit information to the CQC.