

PPC Healthcare Ltd

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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

PPC Healthcare Limited is a domiciliary care agency providing personal care. At the time of our inspection there were 4 people using the service.

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

The provider had systems in place to safeguard people from the risk of abuse. Staff were knowledgeable about safeguarding and would report anything of concern to the management team immediately.

Risks associated with people's care were identified and managed safely. People told us risks were managed appropriately and felt safe using the service.

The providers recruitment system ensured suitable staff were employed. People and their relatives told us staff arrived when expected and stayed at the call for the allotted time.

The management team ensured staff wore personal protective equipment (PPE), when required and were mindful about infection prevention and control. People and relatives told us staff left their home clean and tidy. Accidents and incidents were recorded, action was taken to mitigate future incidents.

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.

Staff told us they received appropriate training which gave them the skills to carry out their role. Staff felt supported by the management team and confirmed spot visits took place to ensure they were carrying out their role safely and effectively.

People and relatives were complimentary about the service they received, commenting that staff were pleasant, kind and polite.

Care plans were person centred and offered staff guidance about how to support people. Staff told us they were keen to ensure care was delivered in line with people's preferences.

The management team had an effective system in place to monitor the quality of the service. The registered manager was responsive to comments and feedback and used this process to develop the service.

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 20 October 2021 and this is the first inspection.

Why we inspected

This inspection was prompted by a review of the information we held about this service.

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 ●

PPC 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 carried out by 1 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 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

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.

What we did before inspection

We sought feedback from the local authority and professionals who work with the service. 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 used all this information to plan our inspection.

During the inspection

We spoke with 2 people who used the service and 2 relatives about their experience of the care provided. We spoke with 6 members of staff including the registered manager and care workers.

We reviewed a range of records. This included 2 people's care records and medication records. We also reviewed a variety of records relating to the management of the service, including policies and procedures.

Inspection activity started on 21 February 2023 and ended on 28 February 2023. We visited the location's office on 21 February 2023.

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

- The provider had systems in place to safeguard people from the risk of abuse.
- Staff received training to help them recognise and report abuse. Staff were confident the registered manager would listen to them and take action if they raised concerns.

Assessing risk, safety monitoring and management

- Risks associated with people's care and support had been identified and were managed to keep people safe.
- Environmental risks were also considered for each property staff visited. This ensured the safety of both staff and people.
- Risk assessments were kept under review and updated as required to ensure people received safe and appropriate care.
- People felt safe using the service. One person said, "They [staff] know I live on my own, so they call me regularly on the telephone to make sure everything is alright." One relative said, "[Relative] is happy and safe."

Staffing and recruitment

- The providers recruitment system assisted them in safely recruiting new staff who were suitable to work for the service.
- The recruitment process included pre-employment checks such as references and Disclosure and Barring Service (DBS) checks. These checks provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.
- People were satisfied staff arrived at the time they said they would and stayed for the full length of time allocated to them. One person said, "They are excellent, they are always on time. I can't fault them."

Using medicines safely

- Staff managed medicines safely. People who required support to access their medication, were assisted to take their medicines as prescribed.
- Medication administration records (MAR's), clearly documented by staff and the management periodically checked these for accuracy.
- Staff received training in medication administration and were only asked to carry out this task when the provider felt they were competent to do so.

Preventing and controlling infection

- The registered manager provided staff with personal protective equipment (PPE) to use where appropriate.
- Staff told us they had training on using of PPE, infection control and how to break the chain of infection. One staff member said, "We can control and prevent spread of infections by regular hand washing, use of PPE, sanitizers and reading policies and procedures relating to spread of infections."

Learning lessons when things go wrong

- The registered manager had a process in place to record and analyse accidents and incidents.
- The process assisted the management team to identify areas for improvement and to take action to minimise future 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 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

- People's needs were assessed prior to them using the service. The registered manager visited prospective service users to discuss their needs and assess if they could provide the support people required.
- Care plans were prepared, involving people and their families and recorded how people liked to receive their support.
- One person said, "I have found a care agency that meets my needs and not there's. I don't have to fit in with them [agency]."

Staff support: induction, training, skills and experience

- Staff told us the training they received helped them to carry out their role effectively. One staff member said, "I feel confident to go and deliver care."
- The provider had an induction package which included training and shadowing experienced staff to prepare them to work alone.
- Staff who were new to care registered to complete the care certificate. The Care Certificate is an agreed set of standards that define the knowledge, skills and behaviours expected of specific job roles in the health and social care sectors. It is made up of the 15 minimum standards that should form part of a robust induction programme.

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

- When required staff supported people to maintain a healthy balanced diet and have access to drinks and snacks.
- Staff offered support with all aspects of meal preparation, including menu planning, shopping and cooking. Staff assisted people to choose their desired food.

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

- The registered manager confirmed they worked alongside other professionals when appropriate to ensure people received appropriate and timely care and support.
- Care documents evidenced healthcare professionals were involved in people's care when required.

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.

- The registered manager and staff had received training in MCA and DoLS and knew how to support people in the least restrictive way.

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 and their relatives told us the care they received was good and they felt well supported and treated with respect. One person said, "I like everything about the service. They respect my wishes and I get on well with the carers that come."

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

- Staff understood the importance of involving people in decisions about their care and support. One staff member said, "I gain consent first by promoting independence and respecting people's wishes."
- People felt comfortable to express their views and told us staff delivered care in line with their choices. One person said, "If there is ever anything, I need to change I talk to them [staff] about it and we find ways to make things work."

Respecting and promoting people's privacy, dignity and independence

- Staff expressed the importance of ensuring people's privacy and dignity were respected. One staff member said, "I try to build a relationship of trust and get to know people to gain their respect."
- Care plans explained how staff should support people to maintain dignity when carrying out tasks such as personal care tasks. Staff explained how they closed curtains and doors to preserve people's dignity.

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

- People were supported by staff who knew them well, understood their needs and respected their choices.
- Staff understood the concept of personalised care. One staff member said, "It means focusing care on the needs of individuals and ensuring that people's preferences, needs and values guide decisions and we are providing care that is respectful and responsive to them."
- Care plans were person centred and reflected people's current needs. People told us they were involved in care planning. One person said, "I have a care plan and the carers asked me about it and talk to me about it."

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 and their relatives told us staff knew how to communicate with them in a way that people would understand and feel comfortable with.
- Staff understood the importance of effective communication and confidentiality. One staff member said, "I ensure sensitive conversations are only held in private spaces."
- Care plans had a section where people's communication skills were documented. This explained how best to communicate with people.

Improving care quality in response to complaints or concerns

- The provider had a complaints procedure although no-one had needed to use this.
- People felt able to raise concerns, although nobody raised any concerns about the service. People told us they felt confident any issues would be resolved effectively. One person said, "They [staff] would definitely respond if I raised any concerns."

End of life care and support

- At the time of our inspection no one was in receipt of end of life care.
- The registered manager confirmed staff received training and would involve the local hospice and district nurses if required to provide comfort at this stage of people's lives.

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.

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

- The management team worked alongside staff to ensure people received person-centred care which supported them to achieve good outcomes.
- Staff understood the importance of promoting a positive culture and were committed to providing a good quality service that met people's individual needs.

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

- The registered manager understood their responsibilities to be open and honest when things went wrong. The provider had a policy in place regarding duty of candour and staff completed training in this area.
- The management team consisted of the registered manager and care co-ordinators. The team worked together to ensure the service was operating effectively.

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

- The provider had systems in place to obtain feedback from people and used comments to develop the service.
- The registered manager gave people the opportunity to give feedback following a spot visit and also via regular telephone conversations. A questionnaire was sent out to people every 6 months to request their feedback.

Continuous learning and improving care

- Systems were in place to monitor and improve the service.
- Management audits were carried out on care planning documents, during spot visits and medication record monitoring. Any concerns noted were acted on and corrected.

Working in partnership with others

- The management team and staff demonstrated they worked well in partnership with others to meet people's needs and develop and improve the service.