

City of York Council

Personal Support Service

Inspection report

Barstow House
St Benedicts Road, Nunnery Lane
York
North Yorkshire
YO23 1YA

Tel: 01904551869

Date of inspection visit:
29 October 2020

Date of publication:
19 November 2020

Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

About the service

Personal Support Service is a domiciliary care agency providing personal care to people living in four separate independent living communities owned by York City Council. The service also provides personal care at night to people living within the city of York. The service was supporting 91 people at the time of 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 happy with the service they received and were supported to feel safe. Risk assessments identified potential risks to people and how to reduce these. Staff understood their role and what was expected of them to keep people safe. Improvements had been made to improve the consistency of staff for people and the registered manager was implementing new systems to further improve this.

People received appropriate support with their medicines. Staff completed infection control training and competency assessments to ensure they had the knowledge and skills to support people safely during the COVID-19 pandemic. Safe recruitment procedures were in place.

Within the context of the COVID-19 infection risk, 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 best practice.

Systems were in place such as audits and surveys to monitor the quality of the service. Lessons were learnt from complaints, safeguardings and incidents were identified and communicated to staff to prevent reoccurrence in the future. Staff received support in the form of regular meetings to support people to receive safe, effective care.

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

Rating at last inspection

The last rating for this service was requires improvement (published 12 April 2019).

Why we inspected

This inspection was prompted in part due to our internal monitoring intelligence. We undertook a focused inspection to review the key questions of safe and well-led only.

We reviewed the information we held about the service. No areas of concern were identified in the other key questions. We therefore did not inspect them. Ratings from previous comprehensive inspections for those key questions were used in calculating the overall rating at this inspection.

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 personal support service on our website at www.cqc.org.uk.

Follow up

We will continue to monitor information we receive about the service until we return to visit as per our re-inspection programme. If we receive any concerning information we may inspect sooner.

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 ●

The service was well-led.

Details are in our well-led findings below.

Personal Support Service

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 Care Act 2014.

Inspection team

One inspector carried out this inspection.

Service and service type

This service provides care and support to people living in specialist 'extra care' housing. Extra care housing is purpose-built or adapted single household accommodation in a shared site or building. The accommodation is rented and is the occupant's own home. People's care and housing are provided under separate contractual agreements. CQC does not regulate premises used for extra care housing; this inspection looked at people's personal care and support service.

The service is also a domiciliary care agency. It provides personal care to people living in their own houses and flats. It provides a night care and support service to older adults. Not everyone using Personal Support Service receives regulated activity; CQC only inspects the service being received by people provided with 'personal care'; help with tasks related to personal hygiene and eating. Where they do we also take into account any wider social care provided.

The service had a manager registered with the Care Quality Commission. 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.

Notice of inspection

Inspection activity started on 27 October 2020 and ended on 06 November 2020. We visited the office location on 29 October 2020.

What we did before the inspection

We reviewed information we had received about the service since the last 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. This is information providers are required to send us with key information about their service, what they do well, and improvements they plan to make. This information helps support our inspections. We used all of this information to plan our inspection.

During the inspection

We spoke with nine people who used the service and six relatives about their experience of the care provided. We spoke with 11 members of staff including the nominated individual, registered manager, five support workers and four team leaders. The nominated individual is responsible for supervising the management of the service on behalf of the provider.

We reviewed a range of records. This included samples of five people's care records and medication records. We looked at three staff files in relation to recruitment. A variety of records relating to the management of the service, including quality assurance documents were reviewed.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We wrote to three health professionals who regularly visit the service.

Is the service safe?

Our findings

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

At the last inspection this key question was rated as requires improvement. At this inspection this key question has now improved to good. This meant people were safe and protected from avoidable harm.

Staffing and recruitment

At the last inspection we recommended that the provider reviewed the organisation of their rotas to ensure consistency of staff for people.

- Improvements had been made to the consistency of staff by reducing the amount of agency use and allocating people a consistent key worker.
- Further work was ongoing to improve consistency of staff for people, such as implementing a new call monitoring system.
- People told us they received care in a timely manner. One person told us, "Yes staff turn up on time and they will always stay longer if I have a problem."
- Recruitment checks had been carried out to ensure staff were of suitable character.

Assessing risk, safety monitoring and management; Systems and processes to safeguard people from the risk of abuse

- People were supported by staff to feel safe. Feedback from people included, "We feel very secure with staff. During the pandemic they've all been excellent, I admire them. We are very grateful".
- Risks to people's safety were recognised and assessments were in place to reduce these risks.
- Staff knew people well and care plans contained explanations for staff to follow to keep people safe.
- Staff were able to identify risk of harm or abuse to people and understood the action to take to protect them.
- The registered manager was aware of their responsibilities to raise safeguarding concerns with the local authority.

Using medicines safely

- People were happy with the support they received with their medication.
- Care plans reflected the support people required with their medicines. They included the level of support needed, where medicines were stored and who was responsible for the collection of medicines from the pharmacy.
- Staff had received medicines training and competency assessments.

Preventing and controlling infection

- This inspection took place during the COVID-19 pandemic. The registered manager and nominated individual told us the steps they had taken to ensure people and staff remained safe and protected from

infection.

- Staff were provided with the required personal protective equipment which included gloves, aprons and masks. Staff received training and competency assessments to ensure they were putting on and taking off PPE in line with guidance.

Learning lessons when things go wrong

- Staff were aware of the reporting procedures for when accident and incidents occurred.
- Accidents and incidents were reviewed by the registered manager to ensure appropriate action had been taken and any lessons learnt were implemented.

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 the last inspection this key question was rated as requires improvement. At this inspection this key question has now improved to good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

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 obligation to notify CQC of all of the significant events that had occurred, and appropriate notifications had been made.
- Systems had been implemented to monitor and review accidents and incidents. This ensured the appropriate action was taken and the appropriate people were informed.
- The registered manager understood their role and responsibilities in relation to the duty of candour. They had been open and apologised when things went wrong.

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

- People told us they were happy with the care they received. Feedback included, "Yes I am happy with the service, I can't complaint about anything. I am really pleased with them". And "Their a credit to the council, I wish we could thank them for everything they do. Pass that on for me, they deserve it. I regard them as family."
- The provider had been piloting technology which had enabled people to live more independently and reduced their dependency on staff support.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Continuous learning and improving care

- Quality assurance audits took place to identify any areas for improvement and action plans were developed from the findings.
- Surveys had been carried out with people to gather their views and feedback on the service. Staff meetings supported staff to keep up to date with any changes. Staff surveys were due to be carried out to seek feedback on satisfaction levels.
- There was an on-call procedure in place to ensure staff could gain support when the management team were not on site.

Working in partnership with others

- Staff and the service worked in partnership with a range of health and social care professionals to ensure people's needs were met.
- The registered manager worked in partnership with housing teams to ensure people were fully supported

and informed during the Covid-19 pandemic.

- The registered manager attended provider forums to share learning to develop the service.