

Prestige Nursing Limited

Prestige Nursing York

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

Prestige Nursing York is a domiciliary care service registered to provide personal care to people living in their own homes. At the time of the inspection the service was providing personal care to seven 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.

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

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 were safe from harm. Systems, safe recruitment and effective risk management supported this. Sufficient numbers of staff were employed to support people with their assessed needs. Where people had been assessed as at risk from any activity, support plans provided guidance for staff to provide safe care and support.

Medicines were managed and administered safely. People told us, and records confirmed people had received their medicines as prescribed.

Staff received a structured induction to the service and individuals who they supported. Training, supervision and support enabled staff to work following best practice guidance which was of benefit to people who they supported. People had good relationships with staff who protected their individual rights and preferences.

People told us staff were kind, caring and respectful. Staff understood the importance of maintaining people's privacy and dignity and encouraged their independence.

The provider completed oversight of the service to ensure quality assurance remained a priority and was effective in maintaining standards and driving improvements. Documents held in the office were secure to ensure confidentiality of people's information, and staff respected people's confidentiality when they supported them.

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

Rating at last inspection

The last rating for this service was Good (published 18 May 2017).

Why we inspected

This was a planned inspection based on the previous rating.

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 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.

Prestige Nursing York

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 is a domiciliary care agency. It provides personal care to people living in their own houses and flats and specialist housing, so they can live as independently as possible.

The service had an acting manager and were in the process of applying to the CQC for a registered manager. Once the application has been approved the registered manager 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

We gave the service 24 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.

Inspection activity was completed on 4 November 2019 when we visited the office location and three people in their own homes.

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 this information to plan our inspection.

During the inspection

We spoke with three people who received personal care, three staff, the acting manager, and the complex care lead. We reviewed three people's care records in the office and three care records in people's own homes. These included medication administration records and daily notes. We looked at one paper staff file and other electronic staff records including, recruitment, induction, training and supervision as well as other records relating to the management of the service.

After the inspection

We looked at some specific information we had asked the provider to send us. This included information on the registered manager status for the home, a range of company policies and procedures, and outcomes from surveys.

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 Good. At this inspection this key question has remained the same. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- Staff understood how to protect people from the risks of abuse and were clear about how to report any concerns. People confirmed they felt safe with staff who attended their homes and with the support they received.
- Safeguarding systems were robust, the provider liaised well with the local authority and investigations were monitored at provider level.

Assessing risk, safety monitoring and management

- People received assessments of their care and where risks were evident support plans were in place for staff to follow.
- Risks were reviewed and updated to help keep everyone safe from avoidable harm.

Staffing and recruitment

- The provider ensured staffing levels were appropriate and recruitment of new staff was safe.
- People were supported by sufficient and suitable staff to meet their needs. They told us, "I have had the same staff for years. They all arrive, usually on time and don't rush off."
- Staff recruitment was ongoing with appropriate pre-employment checks completed on all applicants to ensure they were suitable for the role. The manager said, "We like to employ staff with experience in this line of work, it helps to recruit the right people for people's needs."

Using medicines safely

- People received assessments to determine the level of support they required to take their medicines.
- Staff were trained in the management of medicines and maintained accurate records.
- Checks on medicines management and to ensure staff remained competent to complete this role were completed. Where any further training was required this was provided.

Preventing and controlling infection

- The provider ensured people were protected from harm of infections.
- Staff had been trained in infection prevention and control and used appropriate equipment to minimise the risks from infection.

Learning lessons when things go wrong

- The provider used incidents and events as learning opportunities.
- Staff discussed progress and development of the service in meetings and supervision

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.

At the last inspection this key question was rated as Good. At this inspection this key question has remained the same. 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 provider had effective systems and documentation for assessing people's needs.
- People's assessments were detailed. Information was regularly reviewed which ensured it remained up to date.
- Staff applied learning effectively in line with best practice, which led to good outcomes for people and supported them to have a good quality of life.
- The staff team were committed to ensuring people's diverse needs were met. Staff had received training to ensure their knowledge in supporting people with regards to equality and diversity remained up to date.

Staff support: induction, training, skills and experience

- Staff received a structured induction to their role and the service they provided.
- Staff discussed the benefits of regular supervision. Training was provided and monitored electronically.
- All staff we spoke with told us they enjoyed their work and the provider was a good employer. One staff member said, "The managers support us all; staff included."

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

- Staff supported people well with nutrition. Associated records were up to date.
- Where staff supported people, they were trained in food hygiene. They respected people's choices around meals and mealtimes. One person said, "I don't have any particular preferences at meal times, but staff do help to cut up my food which stops me from choking."

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

- Staff understood the importance of raising any health care needs for people. For example, people told us they could see a GP when they needed, and staff helped them with this where required.
- Important health information was shared should a person need to access other health services. For example, a Hospital.
- Where people required further assessments as their needs changed, for example equipment to remain independent in their own homes, this was completed in consultation with occupational health.

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 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. 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 and found the provider was working within the principles of the MCA.
- Staff had a working knowledge of the MCA and understood where people had been assessed as having a lack of capacity to make larger decisions, the importance of supporting them to make other day to day decisions and choices.

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.

At the last inspection this key question was rated as Good. At this inspection this key question has remained the same. 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

- Staff had received training in and understood the importance of supporting people with any individual needs or preferences. One staff member said, "We support everyone equally, we make adjustments where required and are considerate of people's wishes."
- People received a service from staff who were friendly and polite. It was clear there were positive interactions between staff and people which showed positive relationships had been developed.
- People and their relatives told us staff were caring. People referred affectionately to their long-term staff support. One person said [staff member] has been visiting me for eight years so they understand how to support me."

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

- People and their relatives were involved in their initial assessments to ensure the service was right for them. Information was recorded and shared for staff and other health professionals to follow.
- Where people were able to, they had signed their care plans to agree to the care and support. This information was regularly evaluated to ensure it remained effective. One person said, "I can ask for changes, but I am quite happy – no concerns."
- Staff told us, "We always ask a person before providing any care and support. But it doesn't stop there we always offer choice down to what drink a person would like or when they wanted to get up in the morning."

Respecting and promoting people's privacy, dignity and independence

- People told us staff were considerate when assisting with any personal cares and understood how to maintain their dignity.
- Staff were polite and showed empathy to people's needs.
- People were encouraged to retain their independence and staff confirmed they only assisted people where this was required.

Is the service responsive?

Our findings

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

At the last inspection this key question was rated as Good. At this inspection this key question has remained the same. 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

- Care plans recorded people's input and provided staff with information to support them with their choices and preferences.
- The provider checked people's goals were being met with corrective actions and amendments implemented where this was not apparent.
- Life histories were recorded in detail to support staff to provide non-discriminatory care and support to people.
- Where people had any religious preferences, the provider told us they were supported to follow their faith.

Meeting people's communication needs; Improving care quality in response to complaints or concerns
Since 2016 onwards all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard (AIS). The standard was introduced to make sure people are given information in a way they can understand. The standard applies to all people with a disability, impairment or sensory loss and in some circumstances to their carers.

- The provider identified people's information and communication needs by assessing them and this was recorded for staff to follow in care plans. Staff understood the Accessible Information Standard.
- The manager told us they prepared information in large print and with pictures to help people understand. One staff member told us, "A college helped me to learn Makaton which I now use with one person. It has really improved our communication and I am now much better placed to respond to their needs."
- The provider had not received any complaints about the service since our last inspection. The manager told us, "Staff will address day to day concerns and will support people where necessary to raise any complaints."
- People had information on how to raise complaints available to them and told us they would use this to raise any concerns or complaints. One person said, "I would ring the office if I wasn't happy; but everything is fine. No concerns."

End of life care and support

- The provider was in the process of implementing a Palliative care support plan to support people with any incurable illness to ensure they received appropriate help and support to remain comfortable and pain free.
- At the time of the inspection the provider did not support anybody with end of life care.
- Staff were confident support for end of life would include input from other specialist health care. For example, Macmillan to ensure people remained comfortable and that any preferences, culture or spiritual needs would be met.

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 Good. At this inspection this key question has remained the same. 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

- Management of the service was open, honest, caring and focused on delivering a high standard of care and support. Staff spoke passionately about delivering individualised care and provided people with flexible support to help achieve this.
- The registered manager empowered staff at all levels to take responsibility and work together to achieve good outcomes for people. One staff member said, "The service almost runs itself; we have good teams of staff and supportive management."
- People, relatives and staff told us the management team were approachable and open to feedback.

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; Continuous learning and improving care

- All events at the service were recorded electronically and remained open until satisfactory investigations and outcomes were completed.
- The provider had oversight of events to ensure corrective actions and responses were actioned in a timely way and to ensure people were happy with any outcome feedback that was required.
- Outcomes from investigations were used as part of continual learning. Staff told us information was shared to assure best practice and a high level of support for people.

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

- The roles and responsibilities of management and staff were clearly defined and understood by people who used the service.
- Staff took their roles seriously and raised any concerns they had with the manager
- There were auditing systems in place to support continuous improvements within the service. Where any performance issues or risks were identified, they were investigated, and actions taken to ensure issues were addressed and resolved.
- Systems and process were in place to oversee the service and governance systems drove improvements. This enabled the provider to collate information to show how the service was performing.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Working in partnership with others

- The provider completed surveys with individuals, staff and other stakeholders to enable feedback on what

was working and what required improvement.

- Staff joined meetings to stay informed and contribute to how the service was delivered.
- People and staff told us their diverse needs were always respected and given equal consideration with adjustments made to support people where required.
- Staff understood the importance of good relationships with health care professionals and listened to advice when it was given. People had the benefit of a staff group that were knowledgeable and competent to meet their individual needs.