

Kwikfix Recruitment Services Limited

Northampton

Inspection report

Suite 11-12, Burlington House
369 Wellingborough Road
Northampton
Northamptonshire
NN1 4EU

Tel: 01604603200

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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

Northampton is a domiciliary care agency. It provides personal care to people living in their own houses and flats in the community.

Not everyone using Northampton receives regulated activity; the Care Quality Commission (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. At the time of our inspection, one person was receiving personal care.

At the last inspection in August 2016, the service was rated Good. At this inspection, we found the evidence continued to support the rating of good and there was no evidence or information from our inspection and ongoing monitoring that demonstrated serious risks or concerns. This inspection report is written in a shorter format because our overall rating of the service has not changed since our last inspection.

People continued to receive safe care and support. Care records contained risk assessments and risk management plans to protect people from identified risks and helped to keep them safe. They gave information for staff on the identified risk and informed staff on the measures to take to minimise any risks.

The person using the service told us that they felt cared for safely in their own home. Staff understood the need to protect people from harm and knew what action they should take if they had any concerns. Staff understood their role in caring for people with limited or no capacity under the Mental Capacity Act 2005.

Staffing levels ensured that people received the support they required at the times they needed. The recruitment practice protected people from being cared for by staff that were unsuitable to work in their home.

Care plans were personalised to people's individual needs and wishes. Records contained detailed information to assist care workers to provide care and support in an individualised manner that respected a person's individual requirements and promoted treating people with dignity.

People were supported to take their medicines as prescribed. They were supported to maintain good health, and had access to healthcare services when needed.

People received care from staff that were compassionate, friendly and kind. Staff had the skills and knowledge to provide the care and support people needed and were supported by a registered manager who was receptive to ideas and committed to providing a high standard of care.

There were systems in place to monitor the quality of the service provided. Staff and people were confident that issues would be addressed and that any concerns they had would be listened to.

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 remains good,	Good ●
Is the service effective? The service remains good.	Good ●
Is the service caring? The service remains good.	Good ●
Is the service responsive? The service remains good.	Good ●
Is the service well-led? The service has improved to good	Good ●

Northampton

Detailed findings

Background to this inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection was planned to check whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

This announced inspection took place on 11, 14 and 15 June 2018 and was undertaken by one inspector. The provider was given 48 hours' notice because we needed to ensure someone was available to facilitate the inspection.

Before the inspection, we asked the provider to complete a Provider Information Return (PIR). This is a form that asks the provider to give some key information about the service, what the service does well and improvements they plan to make. The provider completed and returned the PIR in December 2017 and we considered this when we made judgments in this report.

We reviewed the information we held about the service including statutory notifications and any safeguarding referrals raised. A notification is information about important events, which the provider is required to send us by law.

During the inspection, we spoke with the one person who was using the service at the time of the inspection, a member of staff and the registered manager.

We reviewed the care records of the one person using the service and three staff recruitment files. We also reviewed records relating to the management and quality assurance of the service.

Is the service safe?

Our findings

People could be assured that they were being cared for safely. Staff were motivated and strived to provide consistent safe care and support. There were risk assessments in place, which gave staff clear instructions as to how to keep people safe. For example, assessments had been undertaken to identify any risk of people falling; appropriate controls had been put in place to reduce and manage these risks. The person using the service said, "I never feel rushed and the care staff know what they are doing."

Staff understood their responsibilities in relation to keeping people safe from harm. One member of staff explained about ensuring a person's stick was close to them so they could easily access it to walk, ensuring the door was locked when they left the person's home and their mobile was charged so they could always call for assistance if needed.

There was a safeguarding procedure in place and the registered manager knew that if any safeguarding issues arose that they would have to complete the relevant notification for the local authority and Care Quality Commission. There had been no safeguarding concerns raised within the last 12 months.

Staff recruitment processes protected people from being cared for by unsuitable staff and there were sufficient staff to meet the needs of the people. The person using the service said, "I have the same carer's which is very important to me and they are always on time."

Medicines were safely managed. Staff had received training and their competencies were tested regularly. One person said, "The staff remind me when I need to take my medicines and have encouraged me to become more independent." We saw that medication administration records (MAR) were used by staff to accurately record the medicines given.

Staff had completed training to ensure they were up to date with the most recent guidance to keep people safe. Observations and spot checks took place, to ensure staff followed infection control practices. Staff told us they had the appropriate personal protective equipment available to support people safely and the person using the service told us that the staff always washed their hands when they arrived.

The service understood how to record and report incidents, and used information to make improvements when necessary. The registered manager told us that staff meetings would be used to address any problems and discuss any learning points and actions required. At the time of the inspection, there had been no specific incidents.

Is the service effective?

Our findings

People's needs were assessed to achieve effective outcomes, and care and treatment was delivered in line with guidance. We saw that detailed pre-assessments of people's needs were undertaken before care was delivered; this ensured that the service provided met the person's individual needs and took into account both their physical and mental well-being as well as their cultural needs.

People received care from staff that had the skills and knowledge to support them. Staff training was relevant to their role and equipped them with the skills they needed to support people living in their own homes. Staff spoke very positively about the training they had received. One member of staff said, "The training is very good; I completed my care certificate when I first started (The care certificate is a qualification that covers the basic requirements to work within care). Staff told us they were encouraged to undertake further training to enhance their skills and knowledge.

Staff received regular supervision and felt well supported by the registered manager. The registered manager undertook 'spot checks' and stayed in regular contact with staff.

People were encouraged to make decisions about their care and their day-to-day routines and preferences. The person using the service told us "I like to be in control of my care, the staff listen to me and I take the lead."

Staff understood how to support people to maintain a healthy balanced diet. Risk assessments would be undertaken and if anyone was at risk of not eating and drinking enough the staff would ensure they received the support that they required to maintain their nutritional intake. Staff were aware that people should have regular access to healthcare professionals. Any changes in people's health were recognised quickly by staff and prompt and appropriate referrals were made to healthcare professionals.

People who lack mental capacity to consent to arrangements for necessary care or treatment can only be deprived of their liberty when this is in their best interests and legally authorised under the Mental Capacity Act. The procedures for this in community settings are called the Deprivation of Liberty Safeguards (DoLS) and are granted by the Court of Protection. At the time of the inspection, the service was not supporting any people who lacked mental capacity. The registered manager and staff understood their responsibilities in relation to any applications, which may have to be made to the Court of Protection if people were being deprived of their liberty in their best interests. Staff sought people's consent when supporting people with day-to-day tasks.

Is the service caring?

Our findings

The person using the service was happy with the care and support they received. They said, "The staff are very good, they are caring and make you feel cared for." Staff spoke fondly of the people they had supported. One member of staff said, "If I need to I will stay longer to help people."

Staff felt able to spend the time they needed getting to know people to develop positive relationships and provide the care in the way people wanted.

People felt in control of their own care and were happy that staff listened to what they had to say. The person using the service said, "The staff listen to me, they don't rush me and let me take the lead. They have encouraged me to gain my independence."

Care plans included people's preferences and choices about how they wanted their support to be given. The registered manager had tried to ensure that the same staff supported people. This meant that people knew all the staff that cared for them and the support was consistent.

People had access to an advocate to support their choice, independence and control of their care if they needed. At the time of the inspection, no one needed an advocate. The registered manager had a good understanding of when people may need additional independent support from an advocate. An advocate is an independent person who can help support people to express their views and understand their rights.

People were treated with respect. One person said, "I felt uncomfortable with a male carer, [registered manager] ensured I did not have a male carer." Staff knew how to protect people's dignity and maintain people's privacy.

Is the service responsive?

Our findings

People received care that met their individual needs. A range of assessments had been completed for each person and care plans had been developed with people. The person using the service explained that their care plan changed as they regained their mobility and independence.

Staff knew people well; they understood the person's background and knew what care and support they needed. People were supported to follow their interests and for the one person using the service this had meant being supported to return to work.

No end of life care was being delivered, but systems were in place to record people's wishes and choices, as they required.

People were given information about how to make a complaint if they needed. The person we spoke with said they had not needed to make a complaint but would be happy to speak to the registered manager if they did.

A complaints recording system and complaints policy was in place, which showed that information could be recorded in detail and actions, formulated. We saw that there had been no complaints made in the last twelve months.

The service looked at ways to make sure people had access to the information they needed in a way they could understand it, to comply with the Accessible Information Standard. The Accessible Information Standard is a framework put in place from August 2016. It makes it a legal requirement for all providers of NHS and publicly funded care to ensure people with a disability or sensory loss can access and understand information they are given.

Is the service well-led?

Our findings

At the last inspection in August 2016, we found that there had been a breach in regulation as the quality monitoring and review processes in place needed strengthening in order to enable the provider to maintain a clear picture of how the service was operating and of the quality of care and support provided to people. We found that at this inspection, improvements had been made and sustained and the service was no longer in breach of regulation.

A registered manager was in post at the time of the inspection. A registered manager is a person who has registered with the Care Quality Commission (CQC) to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.

People could be assured that the service was being managed competently. The systems in place to monitor the quality and standard of the service were effective and ensured that people received the support and care they required to a good standard. The registered manager was aware of their responsibilities; they had a good insight into the needs of people using the service, and clearly knew the people using the service well.

The service was open and honest, and promoted a positive culture throughout. One staff member said, "[Registered manager] always ensures that they recruit good staff who want to care for people. They are always coming out to check on us and if we need anything, such as more training, this is provided. I would recommend our service as we want to ensure everyone gets the care and support they need in the way they want."

The person who was using the service, at the time of the inspection and the staff, were able to have their voices heard and were engaged and involved in the development of the service. The person we spoke with said that they could contact the registered manager easily and were confident to do so.

Staff meetings were held which staff told us enabled them to raise various topics, including any areas of concern, learning and positive outcomes for people. The provider ensured that the service kept up to date with the current best practice.

The service worked positively with outside agencies. This included a range of health and social care professionals. The registered manager told us about the work they had been doing with one local authority to secure a contract to provide care and support and develop the service.

The registered manager had submitted notifications to the CQC. A notification is information about important events that the service is required to send us by law in a timely way. They also shared information as appropriate with health and social care professionals. The latest CQC inspection report rating was on display at the service. The display of the rating is a legal requirement, to inform people those seeking information about the service and visitors of our judgments.