

First Point 24 Ltd

First Point 24

Inspection report

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18 September 2019

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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: First Point 24 provides personal care, treatment and support to people who require assistance in their own home.

People's experience of using this service: Relatives told us they were very happy with the service being provided.

Care and treatment was planned and delivered in a way that was intended to ensure people's safety and welfare. People were cared for and supported by staff who had received the appropriate training.

Staff were employed following the appropriate recruitment checks.

There were systems in place to minimise the risk of infection and to learn lessons from accidents and incidents. There were safe medication procedures for staff to follow.

Staff had a good understanding of people's preferences of care, staff promoted people's independence. Care plans were reviewed on a regular basis.

People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible; the policies and systems in the service support this practice.

People were supported to eat and drink enough to ensure they maintained a balanced diet and referrals to other health professionals were made when required.

People and their relatives were involved in the planning and review of their care. People were supported to follow their interests and participate in social activities. The registered manager had policies in place to respond to complaints. Support could be provided to people at the end of their life.

The provider had systems in place to monitor and provide good care and these were reviewed on a regular basis.

This service was registered with us on 30/07/2018 and this is the first inspection.

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

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 ●

First Point 24

Detailed findings

Background to this inspection

The 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.

Inspection Team:

The inspection was carried out by one inspector.

Service and service type:

First Point 24 is a domiciliary care agency. It provides personal care, treatment and support to people in their own home. At the time of our inspection they were providing approximately 250 care hours per week.

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:

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. Inspection activity started on 16 September 2019 and ended on 18 September 2019. We visited the office location on 16 September 2019.

What we did:

Before the inspection, the provider completed 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. We reviewed previous reports and notifications that are held on the CQC database. Notifications are important events that the service must let the CQC know about by law. We also reviewed safeguarding alerts and information received from a local authority.

During our inspection we spoke with one person and two relatives. We spoke with the registered manager,

nominated individual and a care worker. We reviewed three care files, two staff files and records held in relation to the running of the service.

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 for 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

- People told us they felt safe using the service. One person said, "So far so good." A relative said, "I don't worry at all about the day to day care."
- Staff had received training in safeguarding and knew how to escalate any concerns. One, member of staff said, "I would notify any concerns to the office."
- The registered manager had policies in place for safeguarding and 'whistle blowing' and knew how to raise concerns with the local safeguarding authority to investigate.

Assessing risk, safety monitoring and management

- During the assessment process the registered manager completed person centred risk assessments to ensure staff had the information they needed to support people.
- Risk assessments provided information on supporting people with their personal care requirements, medication, nutrition and mobility needs. For example, how to assist a person using a wheelchair in the community and how to support them getting into and out of a car.
- A full assessment was completed of the environment where people received care to ensure it was safe for them and staff. All equipment used by people was fully risk assessed.
- The registered manager had policies in place for staff to follow in such events as adverse weather conditions, and reporting systems if staff were unable to attend for work so that alternative cover could be provided.

Staffing and recruitment

- People were supported by regular staff who stayed for the allotted time. The registered manager had recruited more staff in line with the service expanding to accept more care packages. They were also in the process of recruiting to a care coordinator role to assist in overseeing care packages and staff rotas.
- Checks were undertaken on staff before they commenced employment at the service, which included references and disclosure and barring checks. This helped ensure that only people of a suitable character were employed.

Using medicines safely

- Staff had received training on how to support people with taking medication and the registered manager checked staff were competent to support people.
- There were clear care plans guidance and risk assessments which detailed the support people needed with medication.
- Staff checked medication and reordered prescriptions and collected these for people where required.

- The registered manager completed checks on medication and completed audits of medication administration charts to ensure these were completed correctly.

Preventing and controlling infection

- Staff had received training in infection control and were provided with the appropriate personal protection equipment.

Learning lessons when things go wrong

- The registered manager had systems in place to monitor incidents and accidents and to identify any learning points. We saw minutes of meetings where learning points were discussed.

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

- Peoples needs were assessed prior to care commencing and regularly reviewed. Peoples protected characteristics under the Equalities Act 2010 were supported.
- The registered manager and nominated individual kept themselves up to date with best practice guidance.

Staff support: induction, training, skills and experience

- New staff were provided with a full induction and support. The registered manager told us staff new to care would complete the care certificate to ensure they had the knowledge and skills to provide care and support to people.
- The registered manager arranged for face to face training to be delivered to staff and sourced training that was relevant to the care being delivered. The registered manager was completing a train the trainer course so that they could deliver training to staff.
- From records we saw the registered manager completed spot checks on staff as an opportunity to review their practice and to give them support. The registered manager told us they would be completing yearly appraisals for staff.

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

- Nutritional information was obtained on people being supported to identify their preferences and food and fluids likes and dislikes.
- Where people required special diets or assistance this had been identified and staff had been trained in how to support people.
- One person said, "The staff help me clear up and make me a cup of tea."

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

- Staff worked closely with other healthcare professionals such as district nurses, GPs and palliative care. One member of staff said, "If we notice any changes or have any updates we let the district nurse know."
- A relative told us, "The staff have supported (person name) to attend hospital appointments, the dentist and GP."

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 whether the service was working within the principles of the MCA.

- The registered manager worked within the principles of the MCA. Staff knew how to support people to make choices and these were clearly identified in care plans.
- People's consent was clearly documented, and relatives and other care professionals were involved where appropriate with decisions on care and support.

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 relatives were complimentary of the support they received from staff. One person said, "The staff have been really caring lovely ladies." A relative told us, "We are extremely happy with the care. The support has been brilliant"
- People were consistently supported by the same care team.
- Equality and diversity needs were assessed during the assessment process and recorded in care plans.

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

- The registered manager completed a full assessment with people, relatives and other healthcare professionals. During this assessment the registered manager recorded people's views and preferences for care.
- Care packages were regularly reviewed with people and relatives to ensure they were still meeting their needs and requirements.
- People and relatives told us that they had regularly spoken with the registered manager to review care needs and to give their feedback.

Respecting and promoting people's privacy, dignity and independence

- Care plans identified what was important to people and how staff could support them to maintain their independence.
- People were supported to make choices about the kind of support they wished to receive and who they wanted to deliver this support. One person said, "The staff will do anything I ask them to do to help me."

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

- An assessment of people's care needs was undertaken, and care packages planned with people's and relative's full involvement. Where the service had taken over packages from other providers they had met with people and relatives to go through care plans and fully understand support needs with them. A relative said, "I have met with [manager name] and we have completely gone through the care plan."
- When care plans were agreed the frequency of reviews were set with people's involvement.
- Care plans were kept up to date and available to staff to see. Daily records were maintained which outlined the care provided on each visit in detail.

Meeting people's communication needs

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.

- People's communication needs were assessed, and this was recorded in care plans so that staff knew the preferred way to communicate with people.
- Care plans had been implemented if people had specific communication needs such as, large print, nonverbal cues and visual aids.

Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities that are socially and culturally relevant to them

- Staff supported people to follow their own interests and staff were able to support people on trips out if required.
- A relative told us, "The staff support them to go on activities in the community and they go to church every Sunday."

Improving care quality in response to complaints or concerns

- There were systems in place to investigate concerns or complaints. People and their relatives knew how to raise concerns and expressed confidence that they would be dealt with. There had not been any complaints raised.

End of life care and support

- The service actively supported people with end of life care. They worked closely with people, families, district nurses and the palliative care team to support people to have a dignified death at home.

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; 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 and nominated individual both delivered care and support to people. They were experienced registered nurses, knowledgeable and committed to providing high quality care for people.
- Care planning documentation was person centred and aimed at supporting people to make choices about their own care needs and goals for care.
- Staff shared the manager's vision to be a caring company and to support people how they wished to be supported.
- The registered manager understood the duty of candour and their duty to be open and honest about any incident which caused or placed people at risk of harm

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

- The management team had oversight of the service, on a day to day basis. This included systems in place to monitor quality performance and regulatory requirements.
- Staff were clear about their roles and told us they felt well supported by the management team.
- The registered manager had a number of ways of engaging with people who used the service. There were regular reviews of care packages, through face to face meetings and telephone reviews.

Continuous learning and improving care; Working in partnership with others

- The registered manager had audits in place to continuously monitor and improve the service. They also employed external services to help them develop and manage such things as staff recruitment and management.
- The service worked in partnership with other healthcare professionals such as GPs and district nurses.
- The management team kept themselves up to date by attending training relevant to the care they were delivering.