

Positive Care and Support 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

Positive Care and Support Ltd is a domiciliary care agency providing personal care to people in their own homes. At the time of our inspection there were 2 people using the service. The service supports people who have a learning disability and/or who are autistic.

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

We expect health and social care providers to guarantee people with a learning disability and autistic people respect, equality, dignity, choices and independence and good access to local communities that most people take for granted. 'Right support, right care, right culture' is the guidance CQC follows to make assessments and judgements about services supporting people with a learning disability and autistic people and providers must have regard to it.

Right Support:

The service faced challenges in recruiting appropriately skilled staff who could be matched to the people receiving support. There were, however, enough staff to ensure people's needs were met safely. There was on-going recruitment for permanent staff, in the meantime consistent agency staff were being used whenever possible. Agency staff were supervised and had their competency to support with medicines assessed in the same way as directly employed staff. There were occasions when agency staff were introduced who did not know people well, but they were given information about people's needs.

We have made a recommendation about consistency of staffing and support.

People were supported to take medicines safely. Staff helped people to live as independently as possible. 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 supporting people knew people's risks and how to manage these safely. There was a culture in place where staff felt comfortable in raising concerns if they had them.

Right Care: People using the service were able to express their own views. When things went wrong, actions were put into place and lessons learned were shared with staff to improve the standard of care delivered. Staff understood how to protect people from poor care and abuse. The service worked well with other agencies to do so. Staff had training on how to recognise and report abuse and they knew how to apply it. Staff worked with health professionals where they had concerns about people's health.

Right Culture: Staff understood and spoke positively about the importance of person-centred care and

helping people to live as independently as they wished. Work was ongoing to establish people's goals and work towards achieving these. The management team understood their roles and responsibilities and there were governance systems to support this. The service had only been supporting people since July 2022 and some systems and processes were in development. For example, although some feedback had been collected about the service, satisfaction surveys were being sent out for the first time.

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 14 December 2021, and this is the first inspection.

Why we inspected

The service was inspected due to the length of time since it registered with CQC.

Recommendations

We have made a recommendation about consistency of staffing and support.

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?

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.

Positive Care and Support 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 an 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

This inspection was announced. 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 started on 26 April 2023 and ended on 9 May 2023. We visited the service on 26 April 2023 and 3 May 2023.

What we did before the inspection

We reviewed information we had received about the service. 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

Some people had limited verbal communication or chose not to speak with us about their care, so we spent time observing interactions between people and staff. We received feedback from 3 professionals about the support provided. We spoke with 8 staff including the nominated individual, the registered manager, a team leader, 3 support workers (including support workers employed via an agency) and 2 day centre staff. The day centre staff were employed by the provider to support one of the individuals from a day centre base. They also supported the person with social activities in their own home and community. The nominated individual is responsible for supervising the management of the service on behalf of the provider.

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.

Staffing and recruitment

- Staff were recruited safely with appropriate pre-employment checks in place.
- The provider faced difficulties with staff recruitment and finding suitably skilled staff who could meet the needs and preferences of the people being supported. However, there was an ongoing recruitment programme in place and incentives offered to new staff. Some agency staff were moving to permanent roles.
- Due to people's complex needs they required consistent approaches and support. The provider mostly used consistent staff and agency staff who knew people well, however, on occasion this had not been possible.
- When new staff were introduced, they were given information about the person's needs and worked with more experienced staff. Staff were introduced to people over time whenever possible, and people were given opportunity to share their views about the staff who supported them.

We recommend the provider monitor and reviews staffing to ensure people have consistent support from staff who know them well.

Systems and processes to safeguard people from the risk of abuse

- There were clear processes for people and staff to report any concerns about potential abuse and to respond to safeguarding concerns.
- Staff had received training in how to keep people safe and described the actions they would take where people were at risk of harm.

Assessing risk, safety monitoring and management

- Risks to people's safety and welfare were identified and managed. People, including those unable to make decisions for themselves, had as much freedom, choice, and control over their lives as possible because staff managed risks to minimise restrictions. Care plans and risk assessments were reviewed to ensure they reflected current needs.
- The registered manager had done some modelling with staff around effective strategies for one person but records to show which approaches worked and what did not could be improved to ensure all staff were taking a consistent approach.
- The service worked with other professionals to manage risks and reported concerns and issues for further support. One professional told us, "The care team do work hard to keep service user safe and apply strategies provided."

Using medicines safely

- Medicines were safely managed. Staff received appropriate training. Staff had regular checks of their competency to manage and administer medicines.
- There were processes to audit medicines records and investigate errors and omissions.
- The service ensured people's behaviour was not controlled by excessive and inappropriate use of medicines. Staff understood and implemented the principles of STOMP (stopping over-medication of people with a learning disability, autism or both).
- Guidance for staff around medicines required on an as and when basis lacked detail to help staff understand when these should be given. However, this information was available elsewhere in people's care records. We discussed this with the registered manager and the guidance for these medicines was updated in-line with good practice in this area.

Preventing and controlling infection

- Staff had received infection control training and had plenty of PPE such as masks, gloves and aprons.
- People were supported to keep their homes clean and minimise the risk of the spread of infections.

Learning lessons when things go wrong

- Staff recognised incidents and reported them appropriately. Managers investigated incidents and shared lessons learned.
- Incidents where people became distressed were monitored and staff were asked about how they thought support could be improved. These incidents were shared with relevant professionals and reviewed jointly to reduce the risk of these reoccurring.

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 had care and support plans that were personalised, holistic, strengths-based and reflected their needs and aspirations, included physical and mental health needs.
- Care plans reflected a good understanding of people's needs, including relevant assessments of people's communication support and sensory needs.
- Support plans promoted strategies to enhance independence and demonstrated evidence of planning and consideration of the aspirations of each person. Short-term goals were recorded, and staff were working on longer-term goals, however progress towards meeting longer-term goals was not always recorded.

Staff support: induction, training, skills and experience

- Training was comprehensive and adapted to meet the needs of people using the service. It included training on; positive behavioural support, management of actual or potential aggression, autism, learning disabilities and mental health.
- Staff received support in the form of continual supervision, appraisal, recognition of good practice and informal support. One staff member told us, "You've got the support from on-call staff, got support from the team leader or [name of registered manager]."
- Staff could describe how their training and personal development related to the people they supported.

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

- People were involved in choosing their food and planning their meals.
- Staff supported people to be involved in preparing and cooking their own meals in their preferred way. People could have a drink or snack at any time.
- Staff encouraged people to eat a healthy and varied diet. One staff member told us, "We need to work on diet and eating, assisting [name of person] with healthy choices. For example, we've introduced grapes. They tried them and liked them. They like to choose chocolate bars and unhealthy things; we have to encourage them."

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

- People had health actions plans/ health passports which were used by health and social care professionals to support them in the way they needed.
- People were referred to health care professionals to support their wellbeing and help them to live healthy lives.

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 , whether appropriate legal authorisations were in place when needed to deprive a person of their liberty, and whether any conditions relating to those authorisations were being met.

- Staff empowered people to make their own decisions about their care and support.
- For people the service assessed as lacking mental capacity for certain decisions, staff clearly recorded assessments and any best interest decisions.

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

- Staff members showed warmth and respect when interacting with people. They spoke to and about people respectfully.
- Staff and professionals told us they thought staff were kind and caring. One professional told us, 'All Positive Care and Support Ltd staff are always friendly and polite.' A staff member told us, "I'd say all the staff are caring."
- We observed staff supporting people and saw positive interactions, one person laughed and smiled with staff. The person being supported told us, "This one's nice", pointing to the registered manager who was helping to support them at that time.

Supporting people to express their views and be involved in making decisions about their care; Respecting and promoting people's privacy, dignity and independence

- Staff took the time to understand people's individual communication styles and develop a rapport with them.
- People had the opportunity to try new experiences, develop new skills and gain independence.
- Staff respected people's choices and wherever possible, accommodated their wishes, including those relevant to protected characteristics e.g. due to cultural or religious preferences. A professional told us, "Staff fully include person in decision making and actually do work very hard to ensure a 'do with' as opposed to a 'do for' approach is maintained."

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

- Staff supported people through recognised models of care and treatment for people with a learning disability or autistic people.
- Staff discussed ways of ensuring people's goals were meaningful and spent time with people understanding how they could be achieved.
- Staff offered choices tailored to individual people using a communication method appropriate to that person.

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.

- Staff had good awareness, skills and understanding of individual communication needs, they knew how to facilitate communication and when people were trying to tell them something.
- Staff used a system of pictures (called PECS) to communicate with one person. Staff told us the person's verbal communication had improved as they had become familiar with staff, and now they rarely needed to use PECS.

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 provided person-centred support with self-care and everyday living skills to people.
- People were supported by staff to try new things and to develop their skills. One staff member told us, "We're working on [name of person's] routine trying to get them to go out more and exercise, they've been swimming and been revisiting walks and parks. They are getting out in the car; they wouldn't do this before but now they have. It's the small things, pushing them to be more active."
- Staff helped people to have freedom of choice and control over what they did. One person was supported to follow their faith and staff worked with them to achieve goals they had around celebrating this.

Improving care quality in response to complaints or concerns

- The service treated all concerns and complaints seriously, investigated them and learned lessons from the results, sharing the learning with the whole team and the wider service.

End of life care and support

- No one was receiving end of life care. Staff had training in this area and people were supported to plan for this time if they wished.

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

- Management were visible in the service, approachable and took a genuine interest in what people, staff, family, advocates and other professionals had to say.
- The provider/ registered manager and senior staff were alert to the culture within the service and spent time with staff and people and family discussing behaviours and values.
- The registered manager worked directly with people and led by example. They told us, "I do observations to see what's working well and coaching" and, "I'm working alongside staff; we're doing it together as a team. They know what I'm asking them is nothing I wouldn't do myself." A staff member told us, "The team leader is constantly on the ball. [Registered Manager] is always on-call if we need them always there, really supportive."

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

- Staff gave honest information and suitable support and applied duty of candour where appropriate.

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

- Governance processes were effective and helped to hold staff to account, keep people safe, protect people's rights and provide good quality care and support. One professional told us, "Our experience so far is that Positive Care and Support Ltd is well managed and staff appropriately trained."
- Staff were committed to reviewing people's care and support on an ongoing basis as people's needs and wishes changed over time.
- The provider invested in staff by providing them with quality training to meet the needs of all individuals using the service.

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

- People, and those important to them, were involved in reviews of the care provided and gave feedback through this process. Professionals told us they were able to speak with staff about people's care and give their feedback about the service.
- The service had only just sent out satisfaction surveys and had not had opportunity to review these and

respond.

Continuous learning and improving care

- The provider kept up to date with national policy to inform improvements to the service.
- The provider had a clear vision for the direction of the service which demonstrated a desire for people to achieve the best outcomes possible.

Working in partnership with others

- The provider engaged in local forums to work with other organisations to improve care and support for people using the service.
- The provider was involved in provider engagement groups organised by the Local Authority which aimed to help improve care services in the local area.