

Platinum Care Solutions Limited

Platinum Care Solutions

Inspection report

6 High Street
Camberley
GU15 3SX

Tel: 01276986880

Website: www.platinumcareuk.co.uk

Date of inspection visit:
07 February 2020

Date of publication:
03 April 2020

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

Platinum Care Solutions is a domiciliary care agency providing personal care to 18 people aged 65 and over at the time of the inspection. The service was provided to 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 by trained staff who had been recruited safely. Staff knew how to keep people safe, identify abuse and report any safeguarding concerns. Staff were kind and caring towards the people they were supporting.

Risks to people were identified, assessed, managed and monitored in a timely way. All risk assessments were included in care plans that were person-centred. These were subject to regular reviews to ensure any change in needs was addressed.

People were supported with the preparation of food, drink and medicines when they were required. People were supported to follow interests and staff knew people's preferences and hobbies.

Staff were responsive to people's needs and people had the opportunity to be involved in their care planning as well as provide feedback about the service. People were encouraged to be independent and were supported by staff who respected their privacy, dignity and equality.

Staff had regular meetings and supervisions where they could address any concerns or suggest ways for the service to improve. The staff and the registered manager were aware of their roles and responsibilities. Regular quality assurance audits were in place to ensure any issues were identified quickly, addressed and preventative measures put in place.

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.

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

Rating at last inspection (and update)

This service was registered with us on 15/02/2019 and this is the first inspection.

Why we inspected

This was a planned inspection based on the date of registration.

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.

Platinum Care Solutions

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

This inspection was carried out by one 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.

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.

What we did before the inspection

We reviewed information we had received about the service since the registration. We sought feedback from the local authority and professionals who work with the service. We used all of this information to plan our inspection. The provider was not asked to complete a provider information return prior to this inspection. This is information we require providers to send us to give some key information about the service, what the service does well and improvements they plan to make. We took this into account when we inspected the service and made the judgements in this report.

During the inspection

We spoke with one person out of 18 people who used the service and one relative about their experience of the care provided. We spoke with four members of staff including the office staff and two registered managers from other services who were supporting the inspection.

We reviewed a range of records. This included three people's care records and multiple medication records. We looked at two staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including policies and procedures were reviewed.

After the inspection

We continued to seek clarification from the registered manager to validate evidence found. We looked at training data and quality assurance records. We spoke with two people who used the service about their experience of the care provided. We also received feedback from three members of staff and we spoke with a professional who regularly visited the people using 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 that staff made them feel safe in their homes. One person said, "The staff are always very professional and I know they always do their best to keep me safe."
- Staff showed good knowledge in identifying different types of abuse and their responsibilities to report any safeguarding concerns.
- The provider had a safeguarding policy in place and regular training for staff to complete. The registered manager confirmed they were aware of their responsibilities to report any safeguarding concerns to the local authority and CQC. There had not been any safeguarding referrals made since registration.

Assessing risk, safety monitoring and management

- Risks to people had been assessed to ensure people were kept safe. An example of this was an environment risk assessment. This ensured the safety of the person as well as that of the care staff delivering support.
- Risks were managed through regular reviews. Staff showed good knowledge in how to identify, assess and report any new risks identified to the registered manager.
- The service had a business continuity plan in place. This ensured that staff were prepared for emergency situations such as adverse weather, winter planning and staff shortages. This meant that in such situations there would be as little effect on the people using the service as possible.

Staffing and recruitment

- There were enough staff to meet people's needs. One person said, "They [staff] always seem to have enough time. They take their time with the call and my support and are never late."
- The registered manager told us that in order to build the company in to a larger service staffing levels were the priority. The registered manager said, "We would not take on new clients if we didn't have the staffing numbers and know that we could ensure there was travelling time between calls."
- The registered manager followed safe recruitment processes. This included a thorough interview process, as well as requesting references from previous employment. Recruitment checks also included checks with the Disclosure and Barring Service (DBS). This ensured potential staff member were not known to the Police for previous convictions or cautions and were suitable to support the people using the service.

Using medicines safely

- People received support with their medicines when they required it. One person said, "The staff are very good at reminding me to take my medicines and always remember how I like it and give me a glass of water."

- Medicines that were given were recorded appropriately on Medicine Administration Record (MAR) Charts. These were regularly reviewed by the registered manager to ensure any errors were identified and addressed quickly.
- Care plans detailed how people liked to take their medicines, their prescription details and at what time of the day to support people. Care plans stated what side effects each medicine could cause and what action to take if any side effects were noted.

Preventing and controlling infection

- People were protected by the spread of infection. One person said, "They always wear gloves when they are preparing my food, and helping me with my medicines. When they're not wearing gloves, they are using the hand wash all the time."
- Staff received regular training in infection control. One staff member said, "We receive regular training and we can always get extra supplies from the office if we are ever running low."
- The provider had an infection control policy in place for staff to follow. This was provided to all staff during induction and available for any existing staff to review at any point.

Learning lessons when things go wrong

- The registered manager recorded any accidents and incidents. There was a process to check for any trends or patterns. This ensured that people were kept safe from future reoccurrences if a significant incident took place.

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 received a thorough assessment of their needs prior to care being delivered. This identified all care needs of the person requiring support, this then enabled the registered manager and staff completing the assessment that the service could meet the person's needs. This ensured the service worked in line with the NICE (National Institute for Health and Care Excellence) guidance.
- The initial assessment helped the registered manager create a care plan that was individualised to the person and detailed all of their needs and preferences.
- The registered manager told us that it was important to involve the person and their family to ensure as much detail is obtained as possible to create an accurate care plan. Records showed involvement of family members where appropriate, this was seen through signed initial assessments by a next of kin.

Staff support: induction, training, skills and experience

- Staff were supported to complete their role to the best of their ability. One staff member said, "The company is very supportive, if you ever need any extra training it's organised straight away."
- The registered manager and training staff ensured new members of staff completed a thorough induction process. This included 'shadowing' an experienced member of staff, this gave new staff members the opportunity to learn how each person liked to receive their support and see this first hand.
- If the service took on a new client with a particular need, all staff were supported to complete training in this area to ensure they could support the person correctly. People told us that staff were competent in their role. One person said, "The staff are very knowledgeable, they know exactly what they should be doing."

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

- People were supported to eat and drink if they required assistance in this area. One person said, "They're very good, and always make sure they make me things I like."
- Care plans detailed people's preferences in what they liked to eat and drink at each support call. One example was seen where a person had guidance for staff of different drinks they enjoyed depending on what time of day the support call was.
- Staff received regular refresher training to ensure they could prepare food safely. This also confirmed staff were following food and hygiene standards.

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

- The registered manager and staff worked closely with health professionals to ensure people received effective care. An example of this was seen with the documented district nursing team visits and advice that

had been given that staff were following.

- Care plans detailed advice and guidance from health professionals for staff to follow to deliver consistent care from all professionals working with the clients.
- Staff supported people to call health professionals, follow up and attend appointments where necessary. One staff member said, "As soon as we notice any deterioration in health we phone the office and make sure the GP is called."
- Where appropriate staff worked alongside social care professionals to ensure the person received appropriate care to suit their needs and all assessments completed by professionals were shared to prevent any shortfalls.

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, and whether any conditions on authorisations to deprive a person of their liberty had the appropriate legal authority and were being met.

- The registered manager and staff understood their responsibilities in relation to MCA assessments and best interest decisions. There was evidence seen that the registered manager was in the process of working with social care professionals to ensure staff were supporting people in line with the MCA. This included areas of restrictions for a person who had been diagnosed with the early stages of dementia.
- The registered manager and staff were aware of their responsibility to ask for consent. One person said, "The staff are always making sure I am happy with what they are doing and always ask my permission when they are helping me."

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 were supported by kind and caring staff. One person said, "They [staff] are just so lovely to me, they treat me very well and are so kind when they are here." A relative said, "I couldn't ask for anything more, they make [person] comfortable and with their support she's been able to stay in her home, where she wants to be."
- Staff regularly completed equality and diversity refresher training to ensure the main principles were followed.
- Staff showed good knowledge of respecting people's equality and diversity in a caring manner. One staff said, "It's about spending time with them, building a relationship so they know you actually care about them instead of just going there, doing what care you need to do and leaving."

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

- People were asked for regular feedback to ensure they had opportunities to express their views. One person said, "They ask me for my thoughts, I always feel involved." A relative said, "We are often invited to support [person] with decisions, it's nice to be involved and [person] likes us being there as well."
- People and their relatives, where appropriate, were involved in the reviews of their care plans. Documents showed signed reviews from the people using the service that had been completed and suggestions made had been acted upon.
- The registered manager told us she ensures she regularly incorporates her work in to regular visits. She said, "I find that because I am regularly going to see all the people, I'm always asking for feedback we can respond to straight away."

Respecting and promoting people's privacy, dignity and independence

- People told us that their privacy was respected. One person said, "They respect this is my home and I want my privacy, they are very good with that."
- Staff told us how they are always encouraging independence. One staff said, "I give people a choice of what to wear, eat, do. It's about helping them rather than doing things for them (where appropriate) to keep their independence."
- Records showed information identifying what areas people were independent in. This advised staff on how to promote independence where possible for each individual person.
- Staff told us how they did everything they could to ensure people's dignity was respected. One staff member said, "I always ask their permission when providing personal care. I don't do anything they don't want me to do, and it's always in private and behind closed doors."

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

- People told us that staff knew them well and were knowledgeable about their personal preferences. One person said, "They [staff] are really very good. They all know me very well, which is nice and adds a more personal touch."
- Care plans were person-centred and detailed, this showed a good amount of information regarding people's needs and preferences. An example of this was seen through people's routines being detailed and care visits accommodating people's preferences.
- Care plans were clear and easy to navigate on an online system. There were clear sections that had all been completed thoroughly to ensure staff were aware of individual needs. An example of this was one person's care plan detailed specific activities they enjoyed and how long they would spend on each activity before wanting to change to a different activity.

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.

- The registered manager was aware of their responsibility to ensure all people using the service had information in an accessible format. At the time of the inspection there was nobody requiring further assistance, however the registered manager explained they would be able to make all information available. Whether that was through converting to brail, pictorial or larger font, she said, "At the end of the day we have to communicate effectively with the clients, so whatever it takes we will do."

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

- The registered manager and staff showed good knowledge in the people who had important relationships with their relatives or close friends. Their contact details, where appropriate, were in care plans and if the people wanted their family to be aware of updates, these were provided by staff to ensure they were included in their care.
- Care plans detailed hobbies and interest of each person and advice to staff on how to encourage interaction with hobbies. People were supported to follow interests and staff spoke to them about subjects they enjoyed. One staff member said, "I will always chat to my clients about their day and what they enjoy doing, I find that there is always something you have in common with people and finding out what that is gives you a lot to talk about and relate to."

- One person liked to complete a variety of activities, this included watching her favourite television programmes. Each individual television programme was detailed in the care plan to ensure staff were aware what times this person would want the television turned on.
- People told us that staff knew what their interests were and what activities they liked to take part in. One person said, "Whenever they can, the staff always support me to spend time in the garden as they know that is what I enjoy."

Improving care quality in response to complaints or concerns

- People told us that they knew who to contact if they had any concerns. One person said, "If I ever had an issue I would call the office and I have total faith that they would sort it straight away."
- The service had a complaints policy that showed how a complaint would be reported and investigated ensuring a suitable outcome. There was also a process in place to identify any trends or patterns to prevent any further concerns being raised. There had been no recent concerns or complaints raised.
- Staff told us how they were confident in how to deal with complaints in a timely way. One staff said, "I would tell them [person] that I will bring the complaint to my manager and it will be taken seriously and dealt with appropriately." Staff were also aware of the whistle-blowing policy to advise people on how to complain if they wanted to remain anonymous.

End of life care and support

- There was nobody using the service that was receiving end of life care. However, the registered manager and staff understood their responsibilities if someone required this care. The registered manager detailed how they would involve and work alongside local hospices and health care professionals if a person wanted to be at home.
- Care files detailed people's end of life wishes and gave advice for staff to follow if the situation arose.

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

- People told us that they felt the company had a person-centred approach. One person said, "They know all the details I would want them to know, they never get confused between me and someone else, and always make me feel like an individual." A relative also told us, "I like their approach, it's very personal and all the staff are the same they really know [person] and what she needs."
- Records showed that care plans included goals and aims for people to achieve. Staff told us how they encouraged people to express outcomes they wanted. One staff member said, "It's about having a discussion about what outcome they want and give your opinion on what you think the best choice would be without making that decision for them."

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

- The registered manager and staff had open communication with people and relatives. The registered manager said, "It's important to ensure we are as open and transparent as possible, so if anything does happen, it's addressed straight away and everybody who should be made aware is made aware." A relative confirmed this and said, "They are very good at keeping us up to date of everything."
- The registered manager analysed any concerns, complaints or incidents to ensure any learning could be identified, documented and communicated to the whole staffing team.
- The registered manager had submitted notifications to appropriate professionals when this had been required. Notifications to the local authority and CQC is required by law in certain situations, and in response to certain incidents.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; Working in partnership with others

- Staff and the registered manager were clear about their roles and understood what was expected of them. One staff member said, "I aim to provide the best possible care and work in the best interests of the individuals, involving the manager and other health professionals when necessary."
- The registered manager completed regular quality assurance audits to ensure the standard of the care continued at a good level. This ensured if any improvements were identified, changes could be made quickly. No recent improvements had been identified.
- The registered manager and staff worked alongside both health and social care professionals. An example of this was seen through records and evidence of staff following the advice and guidance of the district

nursing team.

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

- People were regularly asked for feedback in relation to the service by the registered manager. One person said "She [registered manager] is always popping in to see me and ask that everything is ok, sometimes it will be as part of a call or sometimes it will just be for a chat." A relative also said, "The manager is very good at listening, you know she will respond to everything straight away."
- There were regular staff meetings where staff discussed any ideas to improve the service or concerns they had. Minutes of each meeting were taken and actions created, this then resulted in an action plan that would be completed before the next staff meeting. All staff would then be updated about the status of the actions from the previous meeting.
- The registered manager valued people and staff's input, she said, "That's the only way a company is going to be successful, if everyone contributes their ideas and those are acted upon to achieve the best service possible."