

## Person Centred Care Consultancy Limited Person Centred Care

#### **Inspection report**

Montpellier House Montpellier Drive Cheltenham Gloucestershire GL50 1TY Date of inspection visit: 10 January 2017

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Tel: 01242321123 Website: www.person-centred-care.co.uk

Ratings

## Overall rating for this service

Is the service responsive?

Good

Good

## Summary of findings

#### **Overall summary**

This was an unannounced inspection which took place on the 10 January 2017. Person Centred Care provides personal care for older and younger people, people living with dementia, people with a physical disability and a sensory disability who live in their own homes in Gloucestershire.

There was a registered manager in post. A registered manager is a person who has registered with the Care Quality Commission 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.

We carried out an announced comprehensive inspection of this service on 20 August 2015. A breach of legal requirements was found. After the comprehensive inspection the provider wrote to us to say what they would do to meet legal requirements in relation to the breach.

We undertook this focused inspection to check that they had followed their plan and to confirm that they now met legal requirements in relation to a breach of regulation 17. This report only covers our findings in relation to this requirement. You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Person Centred Care on our website at www.cqc.org.uk"

At the comprehensive inspection of this service on 20 August 2015 a breach of legal requirements was found. After this comprehensive inspection, we asked the provider to take action to:

• ensure there was an accurate, complete and contemporaneous record in respect of each person in relation to the care being provided.

At this inspection we found action had been taken to make sure each person had an individualised and up to date care plan which reflected their needs and the support and care they required. Quality assurance systems had been introduced to monitor and review people's care needs and to ensure their care records reflected the care and support currently being provided.

The provider had displayed the rating for this service on their website.

#### The five questions we ask about services and what we found

We always ask the following five questions of services.

#### Is the service responsive?

We found action had been taken to ensure the service was responsive. People's care records reflected their individual needs, wishes and routines important to them. They were kept up to date with their changing needs. Systems were in place to audit care records to make sure they continued to reflect the care and support people were receiving. Good



# Person Centred Care 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.

We undertook an announced focussed inspection of Person Centred Care on 10 January 2017. This inspection was done to check that improvements to meet legal requirements planned by the provider after our comprehensive inspection on 20 August 2015 had been made. The team inspected the service against one of the five questions we ask about services: is the service responsive? This is because the service was not meeting some legal requirements.

The inspection was undertaken by one inspector and was announced. We gave the service notice of the inspection because it is small and the manager is often out of the office supporting staff or providing care. We needed to be sure they were in. Prior to the inspection we reviewed information we have about the service including notifications. A notification is a report about important events which the service is required to send us by law.

As part of this inspection we spoke with the registered manager. We reviewed the care records for three people including their medicines records. We also looked at the quality assurance tools used to monitor the standards of care plans and risk assessments, as well as people's experience of their care and support.

## Is the service responsive?

## Our findings

At our inspection of 20 August 2015 we found a complete and contemporaneous record had not been kept in respect of people using the service. This potentially put people at risk of receiving inappropriate care and support. The provider sent us an action plan telling us how they would address these issues.

At our focused inspection on 10 January 2017 we found the provider had taken action to address these issues. People's care records were comprehensive and provided a clear and detailed account of how they wished to be supported with their care and support. People's individual preferences, routines important to them and what they could do for themselves had been discussed with them and their relatives. Staff had been provided with guidance about when they should encourage people to do tasks for themselves, when they should remind people to eat and drink or take their medicines. Care records stated what tasks staff should do and provided them with strategies should people refuse help with their care and support. The registered manager said this might involve requesting support from another member of staff or preparing and leaving food near to people so they could have this later.

People's backgrounds and social histories had been explored with them providing staff with an overview of their lifestyle and experiences. This was particularly important for people living with dementia so staff could engage with them positively and get at insight into how they had lived prior to developing dementia. The registered manager said they were continuing to develop this part of the care plan providing more detail about people's backgrounds to complement records about their medical and physical conditions.

People's changing needs were closely monitored. New forms had been introduced which staff completed as and when they noticed any changes in people's health or well-being. If care records needed changing or updating the office was informed and this record noted the changes. In addition spot checks by the registered manager and provider included an audit of the care records maintained in people's homes to make sure they reflected those care records maintained in the office. People gave feedback as part of this spot check enabling them to express any changes they would like to be made. For example, additional help or more time from staff. Reviews were held every six months or sooner if needed and again provided the opportunity to monitor care records to make sure they reflected the care and support provided to people and what they wished to receive. Electronic schedules had been kept to evidence when spot checks and reviews had been completed as well as copies of paper records in people's care files.