

Premier Care Limited

Premier Care Lancaster Branch

Inspection report

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Tel: 01524928038

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27 July 2022

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Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

About the service

Premier care Lancaster Branch, provides personal care to people living in their own homes in the Lancaster and South Ribble areas. 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. At the time of inspection there were 120 people receiving a service and approximately 80 people receiving personal care.

People's experience of using this service and what we found

People were protected from the risk of abuse and avoidable harm, by staff who understood and followed the provider's policies and procedures. People received safe care from suitably employed and trained staff. People told us they felt safe as a result of the care they received. People received their medicines as prescribed from staff who were trained and competent in medicine administration.

People received consistent care because the provider and registered manager had good oversight of the quality of care and care records. People found staff and managers in the office to be approachable and committed to addressing any concerns they raised. People had been encouraged to give their feedback about their experiences of the service. The most recent analysis showed the majority of people had been satisfied with the service provided.

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

The last rating for this service was requires improvement. (Published 4 March 2020). There were two breaches of regulation. The provider completed an action plan after the last inspection to show what they would do and by when to improve. At this inspection we found improvements had been made and the provider was no longer in breach of regulations.

Why we inspected

We carried out an announced comprehensive inspection of this service on 4 March 2020. Breaches of legal requirements were found. The provider completed an action plan after the last inspection to show what they would do and by when to improve safe care and governance.

We undertook this focused inspection to check they had followed their action plan and to confirm they now met legal requirements. This report only covers our findings in relation to the Key Questions Safe and Well-led which contain those requirements.

The ratings from the previous comprehensive inspection for those key questions not looked at on this occasion were used in calculating the overall rating at this inspection. The overall rating for the service has changed from Requires improvement to Good. This is based on the findings at this inspection.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Premier Care Lancaster Branch on our website at www.cqc.org.uk.

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 well-led?

Good ●

The service was well-led.

Details are in our well-led findings below.

Premier Care Lancaster Branch

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

The inspection was completed by one inspector and two Experts by Experience. An Expert by Experience is a person who has personal experience of using or caring for someone who uses this type of care service.

Service and service type

This service is a domiciliary care agency. It provides personal care to people living in their own homes.

This service is required to have a registered manager. A registered manager is a person who has registered with the Care Quality Commission to manage the service. 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.

At the time of our inspection there was a registered manager in post.

Notice of inspection

This inspection was unannounced.

Inspection activity started on 27 July 2022 and ended on 28 July 2022. We visited the office location on 27 July and sought feedback from staff on 28 July 2022.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority and professionals who work with the service.

During the inspection

We spoke with 24 people, and/or their relatives, who received a service. We spoke with the registered manager, medicines co-ordinator and received feedback from a further three members of staff.

We reviewed a range of records including; the care records of four people, multiple medicine records, recruitment records and the training matrix. We reviewed a range of governance records which included audits of care quality and care records, feedback from service users and their relatives, and feedback from commissioners.

Is the service safe?

Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm.

At the last inspection this key question was rated as requires improvement. At this inspection this key question has changed to good. This meant people were safe and protected from avoidable harm.

Assessing risk, safety monitoring and management; Using medicines safely

At our last inspection published 4 March 2020, we found risks had not been properly assessed, medicines had not been documented consistently and there had been no action plans to identify how any issues managers found might be addressed to avoid any reoccurrence. This was a breach of regulation 12 (safe care and treatment) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made, and the provider was no longer in breach of regulation 12.

- People felt safe as a result of the care and support they received. People told us; "My relative is safe as the carers know them well. They have extensive records of their medical issues" and, "I feel safe being looked after by Premier care as the carers are very good and I know my property is safe."
- People were protected from the risk of avoidable harm because the provider and registered manager ensured their risk management policies and procedures had been followed.
- People were protected from the specific risks they faced because staff understood how to follow the risk assessments in care records. One person said, "The service is very good I have spoken to the manager as she has been to my house to see my bathroom and bedroom to make sure I am safe at home."
- People were protected from emerging or increasing risks because risk assessments had been reviewed and updated.
- People received their medicines as prescribed because staff had received training and were competent in supporting people.
- People's medicine records were consistently and accurately completed by staff, because the provider had appointed a medicines co-ordinator to oversee all aspects of medicine support.
- People were protected from the risk of reoccurrence of any issues or incidents because the registered manager ensured all incidents were recorded and analysed to ensure lessons could be learned.

Systems and processes to safeguard people from the risk of abuse;

- People were protected from the risk of abuse because the provider and registered manager followed their robust policies and procedures.
- People were protected by staff who had received training about safeguarding and understood how to raise any concerns.
- The registered manager raised concerns with the local authority safeguarding team when required.

Staffing and recruitment

- People were supported by suitable staff because the provider and registered manager followed their robust recruitment policies. All necessary pre-employment checks had been completed, which helped ensure staff were suitable to work with people.
- People were supported by staff with the right knowledge and skills because the provider and registered manager ensured staff were suitably trained to meet people's specific needs.

Preventing and controlling infection

- People were protected from the risk of infection because staff followed robust infection prevention and control measures.
- Staff used personal protective equipment (PPE) effectively and safely. The provider had ensured appropriate PPE was available for staff.

Learning lessons when things go wrong

- The provider's policies in relation to analysing incidents in order to learn lessons to avoid reoccurrence were understood and applied by the registered manager.
- Records showed incidents were analysed and action plans developed to address any practice issues.

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.

At the last inspection this key question was rated as requires improvement. At this inspection this key question has now changed to good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

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

At our last inspection we found systems to oversee the quality of care and care records had not been robust. Governance and audit records had not been consistent. This was a breach of regulation 17 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 17.

- The quality of people's care and care records were maintained because the registered manager understood and followed the provider's quality monitoring systems. One person told us, "The care plan is in my house so carers can read it. A lady comes about once a month to look at the book and change paperwork, so I know they are managing my needs well."
- Staff understood the quality of care they were expected to provide because managers were clear about how staff supported people and recorded support provided.
- The registered manager worked in cooperation with commissioners to maintain the quality of the service. The most recent contract monitoring visit by the local authority confirmed this.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

- People told us they were happy with the way the service was managed and praised the quality of care provided by the staff. Comments included; "The office is easy to contact and the staff are very friendly. I would recommend the service as the carers are reliable, do a good job." and, "The service is well managed. I don't have a lot of interaction with management, but everything is running smoothly."
- The provider and registered manager were clear about the values of the service and were committed to providing high-quality care which achieved 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

- People and their relatives had been kept informed about any incidents or issues, because the registered manager ensured they were open and honest with people.
- The registered manager was aware of their responsibilities to report any notifiable incidents to the

appropriate agency. This included; CQC, the Health and Safety Executive and local authority safeguarding.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Continuous learning and improving care

- People were encouraged to share their views about their experiences of care provided because the provider and registered manager sought regular feedback.
- The registered manager and office team were approachable and responsive to people when they contacted the office. People told us; "I have had a questionnaire which I sent back with my views and opinions. I have no trouble contacting the office if I have any questions. I would recommend the service; I can't find fault with the service that is provided." and "The office answers when I ring them and they do something about each issue."