

Napier Homecare Services Limited

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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 well-led?	Good

Summary of findings

Overall summary

About the service

Napier Homecare Services Limited provides domiciliary services to 147 people who require support in their own home at the time of our inspection. The service supports a wide range of people in the community and operates seven days a week. Napier Homecare Services Limited will be referred to as Napier Homecare within this report.

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

People confirmed their medication was managed safely. One person said, "No problems, yes they watch me while I take the medication." The manager enhanced infection control procedures and ensured staff had sufficient equipment during the pandemic. People and their relatives stated they felt safe and staff had training to enhance their skills to protect each person.

People and relatives experienced Napier Homecare as a friendly, professional service and told us the management team had a positive impact on care. Staff stated they worked well together and found the new manager was supportive and caring.

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 good (published 18 May 2018).

Why we inspected

We wanted to assure ourselves the service remained safe since our last inspection and continued to be led well under the new manager.

We looked at infection prevention and control measures under the safe key question. We look at this in all care home inspections even if no concerns or risks have been identified. This is to provide assurance that the service can respond to coronavirus and other infection outbreaks effectively.

We reviewed the information we held about the service. No areas of concern were identified in the other key questions. We therefore did not inspect them. Ratings from previous comprehensive inspections for those key questions were used in calculating the overall rating at this inspection.

We found no evidence during this inspection that people were at risk of harm from this concern. Please see the safe and well-led sections of this full report.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Napier Homecare on our 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?	Good •
The service was safe.	
Details are in our safe findings below.	
Is the service well-led?	Good •
Is the service well-led? The service was well-led.	Good •



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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.

As part of this inspection we looked at the infection control and prevention measures in place. This was conducted so we can understand the preparedness of the service in preventing or managing an infection outbreak, and to identify good practice we can share with other services.

Inspection team

This inspection was carried out by an inspector and an Expert 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 houses and flats.

The service did not have 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. However, we saw evidence the new manager was in the process of registering with CQC.

Notice of inspection

This inspection was unannounced.

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 commissioning and safeguarding teams. 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 Napier Homecare and made the judgements in this report. We used all of this information to plan our inspection.

During the inspection

We spoke about Napier Homecare with four people, four relatives, five staff, the manager and the provider. We looked at records related to the management of the service. We did this to ensure the provider had oversight of the service, responded to any concerns and led Napier Homecare in ongoing improvements. We checked care records of three people and looked at staffing levels, recruitment procedures and quality oversight.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at medication and training records, as well as their quality assurance systems.



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 good. At this inspection this key question has remained the same. This meant people were safe and protected from avoidable harm.

Using medicines safely

• Staff managed people's medication safely, including controlled drugs in line with the Misuse of Drugs Act and associated regulations. They were able to describe good practice and confirmed their skills were regularly checked. A staff member said, "Yes, I've had all the up-to-date training. You can't rush it, you just can't rush anything."

Preventing and controlling infection

- There were considerable stocks of Personal Protective Equipment (PPE), such as disposable gloves, masks and aprons, which staff used correctly. The provider stated they had six months' supply at any given time to ensure staff never ran out of equipment.
- People and their relatives verified staff wore PPE at all times to help them stay safe. One person commented, "Yes never seen them not. They wear the mask, apron and gloves."
- The manager enhanced infection control policies and procedures, as well as risk assessments to mitigate risks associated with care during the pandemic.

Assessing risk, safety monitoring and management; Learning lessons when things go wrong

- Staff and the management team had assessed each person's needs and the potential impact of COVID-19. People and their relatives stated they felt safe throughout the pandemic. One person said, "Yes, I do really."
- Staff told us the manager was keen to listen their ideas and to improve the service. For example, the manager explained, "We look at the reasons why staff test positive to check they are washing hands and wearing PPE and look if we could have done anything further to prevent that."

Systems and processes to safeguard people from the risk of abuse

• Information was made available to people, relatives and staff about safeguarding and reporting concerns to appropriate agencies. Staff had training to enhance their skills to protect each person.

Staffing and recruitment

- Staff confirmed there were sufficient staff to meet each person's agreed care package. A staff member told us, "We have lots of staff. We always get a second colleague when needed."
- The manager used the same, safe recruitment procedures we found at our last inspection. Staff stated their recruitment was professional and they completed a thorough induction programme.



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 good. At this inspection this key question has remained the same. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

- People and relatives experienced Napier Homecare as a friendly, professional service and told us the management team had a positive impact on care. They said the new manager was thoughtful and kind. One person stated, "She messages me every morning to see if I am fine."
- Staff spoke highly of the new manager. A staff member told us, "She's so supportive. When I was ill, she rang every day to check if I needed anything." Another employee added, "Napier is the best agency I've worked for because they really do support you, you're not on your own."

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; Continuous learning and improving care; 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 management team each had responsibility for an area of quality assurance. Systems flagged up any potential issues and review dates. The new manager explained, "One person in control of this makes for better monitoring."
- Staff said they worked well together and the management team kept them updated to all the new COVID-19 guidance. One employee commented, "It's managed very well. You get a lot of training and support."

Working in partnership with others

• The management team and staff worked closely with health and social care agencies to share good practice and enhance care delivery. For example, the new manager engaged with an online managers' forum to gain support and evidence-based systems and protocols.