

Paladins Care Limited

# Paladins Care Limited

## Inspection report

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20 February 2020

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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?

Requires Improvement ●

# Summary of findings

## Overall summary

### About the service

Paladins Care Limited is a domiciliary care agency providing personal care to people living in their own homes or flats. The service provides care visits and offered live-in support for people in the day and overnight.

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. The service was supporting 22 older and younger adults with the regulated activity of personal care at the time of this inspection.

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

People were positive about their care. One person told us, "[Staff] are brilliant and so kind. They really know what is important to me."

People received kind and compassionate care from staff who had got to know them as individuals. People's care was tailored to meet their specific needs and preferences. Staff respected people's privacy and dignity, and supported people to stay as independent as possible. The registered manager involved people in their care planning and staff ensured that people were supported to make choices about their day to day care.

Staff had a good understanding of safeguarding and how to keep people safe. Risk assessments were completed to help mitigate any risk to people while they were being supported. There were enough staff to support people safely and staff were recruited robustly to ensure that they were fit for the job role. Staff members received training and supervision to ensure they could support people effectively. People were supported safely with their medicines. The registered manager reviewed any incidents and shared any lessons learned with the staff team.

People's needs were assessed before they began using the service. People were supported to eat a balanced diet depending on their support needs in this area. Staff supported people to live healthy lives and contacted health professionals if more support was needed. People were supported to access the community and take part in activities which met their preferences and interests. People had access to a complaints procedure and complaints were responded to appropriately.

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.

The registered manager had developed a positive culture at the service. They were open and honest about improvements that needed to be made in areas such as call time monitoring, medicines management and

staff support. Plans were in place to rectify these issues. People and the staff team were regularly asked for feedback about the service. The registered manager linked and worked with other organisations to promote positive outcomes for people.

For more details, please see the full report which is on the CQC website at [www.cqc.org.uk](http://www.cqc.org.uk)

Rating at last inspection

The last rating for this service was good (published 24 May 2017).

Why we inspected

This was a planned inspection based on the previous rating.

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?

Requires Improvement ●

The service was not always well-led.

Details are in our well-led findings below.

# Paladins Care Limited

## 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.

The service had 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.

#### 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.

Inspection activity started on 17 February 2020 and ended on 20 February 2020. We visited the office location on 17 February 2020. We spoke to people and their relatives to collect feedback about the service on 19 and 20 February 2020.

#### What we did before the inspection:

We reviewed information we had received about the service since the last inspection. We spoke to professionals who worked with the service to collect their feedback. The provider was not asked to complete the Provider Information Return. This is information providers are required to send us with key information about the service, what it does well and improvements they plan to make. We took this into account in making our judgements in this report. We used all of this information to plan our inspection.

During the inspection:

We spoke with five people and two relatives about their experience of the care provided by the service. We spoke with six care staff and the registered manager.

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

After the inspection:

The registered manager sent us further evidence in relation to quality assurance records and training data.

# 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.

Systems and processes to safeguard people from the risk of abuse

- People felt safe being supported by staff. People told us, "I feel very safe with [staff member]. They make me feel like everything is OK." and, "I feel very safe with [staff] and would put my life in their hands."
- Staff had a good understanding of how to keep people safe. They knew what potential abuse could look like and how they could report concerns both internally and externally to local safeguarding teams.

Assessing risk, safety monitoring and management

- People had detailed risk assessments in place which covered their support needs. Risk assessments enabled people to stay independent whilst keeping them safe. One person said, "[Staff] know how to use all my mobility equipment and this makes me feel very confident."
- The registered manager completed assessments of people's homes to ensure that any risks were mitigated both for people and the staff supporting them.
- Systems were in place to cover potential missed or late care visits to people. This ensured they still received the support they needed.

Staffing and recruitment

- People told us there were enough staff to support them safely and that staff were consistent so that they could get to know them well. People told us, "I only ever see the two staff members, so I have gotten to know them really well." and, "There are plenty of familiar staff and [registered manager] will cover if anyone is off sick."
- People told us, and records showed that on some occasions staff members arrived late for care visits. Whilst this could be explained most of the time we found some occasions where there was no explanation for this. Whilst there was no impact to people, there was a potential that this may impact on people in the future.
- The registered manager acknowledged the times where late calls could not be explained and immediately addressed the issues which we found. They also gave us evidence that they had plans in place to improve in this area which would further mitigate the risk to people.
- The registered manager completed thorough recruitment checks to ensure that people were suitable to work at the service.

Using medicines safely

- People received safe support with their medicines. One person told us, "[Staff] are well trained with the medicines and always ask the nurses or doctors for advice with new ones."
- The registered manager had systems in place to monitor and audit the administration of medicines,

however these were not always effective. It was not always clear how long a gap should be left between the administration of some medicines. This had the potential to be a risk to people using the service.

- The registered manager acknowledged that this system could be improved and spoke to us about how they would implement improvements to help keep people safe.
- Staff members had training and a good understanding of how to support people with their medicines. The registered manager checked staff members competencies in this area.

#### Preventing and controlling infection

- Staff members had access to equipment such as gloves and had a good understanding of how to promote good infection control.
- People told us that staff members supported them to keep their homes clean if this was required. One person said, "[Staff] keep my house nice and clean and know I would not have it any other way."

#### Learning lessons when things go wrong

- The registered manager kept records of incidents and accidents and reviewed them to ensure that lessons were learned when things went wrong. This was then discussed with the staff team to ensure that any lessons were shared, and improvements could be made.

# 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.

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. 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

- The registered manager met people and assessed their needs before they started using the service. This included people's holistic needs such as social and emotional, as well as their basic support needs. One person told us, "[Registered Manager] really listened to how I wanted my carers to be. They know its best for me to have people I know I will get on with."
- When people's needs changed the registered manager ensured that the service could still support them effectively. In some cases, the registered manager supported people to access different services which could meet their needs.

Staff support: induction, training, skills and experience

- People felt that staff were well trained. People told us, "[Staff] know what they are doing. They are always confident when they help me out." and, "[Registered manager] is always about making sure that the [staff] are doing their jobs well."
- Staff felt well supported by the registered manager. Staff told us they received regular supervisions and spot checks of their practice when supporting people.
- Staff received a thorough induction before they started supporting people. This involved working with staff who already knew people well, so that people felt comfortable with new staff members.

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

- People were positive about the support they received with their food and drink. One person said, "[Staff] are great cooks. Before I only wanted to eat frozen foods, but staff have helped me try lots of nice fresh stuff and I feel better for it." Another person told us that thanks to staff supporting them with their meals, they had put on weight. This had been a goal of theirs for some time.
- Staff had a good understanding of people's specific dietary needs, such as how they needed their meals prepared or the food and drink they preferred. The registered manager ensured that this information was recorded and available in people's care plans.

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

- People were supported to see health professionals such as GP's, district nurses and physiotherapists. One person said, "[Staff] took one look at me once and knew I wasn't feeling right. So, they called the doctor and got me an appointment immediately. [Staff] then came a couple of hours early for my visit so I got to my appointment on time."
- People were supported to live healthy lives depending on their support needs. Staff supported people to

take regular exercise or attend classes which helped promote their mobility. People were also supported to eat a diet which promoted a healthy lifestyle.

#### 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. Where people may need to be deprived of their liberty in order to receive care and treatment in their own homes, the DoLS cannot be used. Instead, an application can be made to the Court of Protection who can authorise deprivations of liberty.

- People were asked for consent before staff supported them. One person told us, "[Staff] are very polite and always ask before they do things."
- People had capacity assessments in place where it was felt they may need more support with making a decision. We noted that these were not always for specific decisions, but rather a general assessment of capacity covering all areas.
- We spoke to the registered manager about this. They told us that if people started to lack capacity in certain areas, a separate assessment and best interest meeting would be completed.
- People did not currently need a DoLS in place, however the registered manager knew how to support people with this, if the need arises.

# 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.

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 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 positive about the care they received. People told us, "[Staff] are fantastic. I have never met such lovely people in my life." and, "[Staff] sit with me and spend time with me. They know me like a member of their own family."
- We saw staff talking with people in a kind and compassionate manner. Live-in carers were very aware that they were in people's own homes and showed the utmost respect to their preferences and routines.
- Staff spoke passionately about the support they gave to people and knew people's individual beliefs and preferences.

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

- People were supported to make choices about their day to day support. One person said, "I pretty much get a choice in everything- like what to wear and when to go out and about."
- People were regularly asked to share their opinions and decisions about their support. One person told us, "[Registered Manager] always comes around for a chat to ask me how things are going and makes changes if I want them."
- Staff had a good understanding of how to encourage people to make choices. This included showing people visual choices and explaining what choices meant to people.

Respecting and promoting people's privacy, dignity and independence

- Staff helped people to stay independent for as long as possible. One person told us, "[Staff] help me to stay independent where I can but will help me if they need to."
- Staff had a good understanding of how to encourage people to be independent in areas such as maintaining mobility or cooking.
- People's privacy and dignity was respected. One person said, "I have a live-in carer, but I always have time to myself to relax if I need it."
- Information about people was stored and shared with the staff team confidentially.

# Is the service responsive?

## Our findings

Responsive – this means we looked for evidence that the service met people's needs.

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. 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 received personalised care which met their support needs and staff had a good understanding of people's individual likes, dislikes and preferences.
- People told us, "[Staff] know what I like and what I don't like. Things like what to watch on TV and how I take my drinks." and, "[Staff] have got to know me well as a person."
- Staff supported people to have a choice and control in all aspects of their lives, such as what they had for meals and how they spent their time.
- People spoke to us about how they had achieved positive outcomes thanks to the support of the registered manager and the staff team. This included becoming healthier thanks to a healthy diet and being supported to regain their confidence in areas such as personal care.
- The registered manager had created care plans for people and these were designed to focus on people's emotional needs and preferences. However, these had not been used effectively and in some cases, these had not been recorded for people. The registered manager told us that they would review these care plans to ensure that individual preferences were recorded.

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.

- Staff were trained and knew how to communicate with people in a variety of methods such as using signs or showing objects to people.
- Information such as the complaints procedure and safeguarding policy was available in an easy read format to aid people's understanding.

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

- People who had support to access the community, took part in a variety of activities such as shopping, pub and restaurant visits, exercise classes, social clubs and walks around the local area.
- People told us, "I go out and about to town all the time and do my shopping and [staff] take me to the church every weekend. I've been to museums and a safari park, but I can just tell staff where I want to go, and they take me there." and, "I get out and about an awful lot. Exercise classes and social clubs and I also like to go to the cinema. Nothing is too much trouble for [staff]."
- Staff supported people to stay in contact with families and friends, if this was important to them.

#### Improving care quality in response to complaints or concerns

- The registered manager had a complaints policy in place and this was readily available for people. One person told us, "I did make a complaint back when I started using the service and this was all sorted out really quickly."
- Records showed that complaints were responded to promptly and the complainant was contacted to make sure that they were happy with any actions put in place.

#### End of life care and support

- The registered manager had not yet supported people to put plans in place for the end of their life. They told us that they knew what was important to people, however would support people to record their wishes formally when they next met with people.
- The staff team had training and a good understanding of how to support people with dignity and respect at the end of their life.

# 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 deteriorated to requires improvement. This meant the service management and leadership was inconsistent. Leaders and the culture they created did not always support the delivery of high-quality, person-centred care.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; Continuous learning and improving care

- The registered manager was open and honest about improvements that could be made at the service. This included improvements to the monitoring of care visit and medication times and including more information about people's preferences in their care plans.
- The registered manager also acknowledged that improvements could be made to the ways in which staff were being supported to improve their skills and knowledge. Staff were receiving supervision and spot checks, but these were not all being recorded and used to develop staff members. There was a potential that staff could miss out on potential areas to improve their practice.
- The registered manager understood that they needed more support to improve quality monitoring at the service, particularly around auditing and records. They had a plan in place to improve the service in these identified areas. This included the recruitment of a deputy manager and supporting a care worker to take on more administration responsibilities in the office. We were satisfied that this would rectify the issues identified at this inspection.
- Staff members were clear about their roles and responsibilities when supporting people.
- The registered manager completed audits of the service in areas such as staff files, health and safety and feedback from people to monitor the quality of the service.
- Plans were in place to manage the service in emergencies such as staff shortages or people needing more support.

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

- The registered manager promoted a positive culture at the service. They also made sure that they spent time with people and the staff team to ensure that people were happy using the service and were achieving the outcomes which they desired.
- People were positive about the management of the service. One person said, "[Registered manager] is so good at her job. They are not afraid of helping me out like the staff do either."
- The registered manager reported notifiable events to the Care Quality Commission where this was necessary.

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

#### characteristics

- People were regularly asked for feedback about the service both formally and informally. One person told us, "[Registered manager] is always about and always asking me how I am getting on."
- Staff members were also involved in regular team meetings and discussions about the direction of the service. Staff members were positive about the registered manager and felt that their ideas about how to improve the service were listened to.
- The registered manager collected feedback from people in the form of surveys and questionnaires and used this to inform the development of the service.

#### Working in partnership with others

- The registered manager and staff team worked well with other health professionals to ensure that people achieve good outcomes with regards to their health and wellbeing.
- People were supported to identify and work with other agencies such as support groups. This enabled them to build positive relationships in their local community.