

Partners4Care Limited

Partners4Care Limited

Inspection report

26 Yarm Road
Stockton-on-tees
TS18 3NA

Date of inspection visit:
03 June 2021
04 June 2021
08 June 2021

Date of publication:
07 July 2021

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

Partners4Care Limited is a domiciliary care agency. It is registered to provide personal care to people living 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. At the time of our inspection, 142 people were receiving personal care.

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

Care records were on an electronic system. Most records were comprehensive and up to date. However, some of the care plans we looked at required further information and we were assured by the registered manager this would be quickly addressed. People were involved in decisions about their care. Staff were aware of people's communication needs and how best to support them. People were not always happy with the way complaints were handled and we have made a recommendation about this.

Most of the people we spoke with were happy with the care they received. One person told us, "Partners 4 care have been brilliant throughout the pandemic. Staff make time to chat to me, encourage me to do what I can and help with what I can't. I can't think of any Improvements."

Medicines were well managed, and people were happy with the way staff gave them their medicines. Staff were aware of how to identify and report safeguarding concerns. Safe recruitment practices were followed. Staff followed infection control procedures, had access to personal protective equipment (PPE) and had been trained in how to use it safely.

Staff training was up to date. The staff we spoke with were happy with the training they had received. People were supported by a range of healthcare professionals and staff sought medical assistance when people were unwell. Where people required support with eating and drinking, staff had the skills to support them safely. 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.

Staff promoted people's independence and respected their rights, privacy and dignity. Where possible, care was delivered by a small group of staff to provide consistency. Some people were unhappy with last minute changes to the rota and the registered manager acknowledged this had been difficult to manage during the COVID-19 pandemic. Late and missed calls were kept to a minimum by using an electronic monitoring system which alerted office-based staff to any delays so action could be taken.

The registered manager had systems in place to monitor and improve the quality and safety of the service provided. People's views about the service were sought individually and through surveys. The most recent survey was not very well responded to and some people did not seem to have received their copy. The manager was going to review how feedback was obtained. Most staff we spoke with felt well supported and

able to approach the management team with any issues or concerns.

We found the management team receptive to feedback and keen to improve the service. The registered manager worked with us in a positive manner and provided all the information we requested.

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

Rating at last inspection

This service was registered with us on 26 September 2020 and this is the first inspection.

Why we inspected

This was a planned inspection based on the date the service was registered.

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.

Partners4Care 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

The 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 and specialist housing.

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

This inspection was unannounced.

Inspection activity started on 3 June 2021 and ended on 8 June 2021. We visited the office location on 3 June 2021.

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. 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. We used all of this information to plan our inspection.

During the inspection

We spoke with four people who used the service and three relatives about their experience of the care provided. We spoke with five members of staff including the registered manager, clinical manager, field supervisors, office staff and care workers. We also received feedback from a further 11 members of staff.

We reviewed a range of records. This included four people's care records and multiple medication records. We looked at four 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 provider to validate evidence found. We looked at a number of records sent to us electronically including training data and quality assurance records.

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

- The provider had systems in place to safeguard people from the risk of abuse. The registered manager took appropriate action where there were any concerns and staff understood their safeguarding duties well.
- Staff had received training on safeguarding and understood what steps to take to keep people safe from abuse. One member of staff told us, "In my personal experience, if I've had a safeguarding concern, I've known how to raise an alert. If I have any issues, I know I can contact [my line manager]."

Assessing risk, safety monitoring and management

- People did not always receive care from a familiar member of staff. This meant they did not always feel safe or happy with the support they received. One relative told us, "[My family member] feels all at sea because different carers are coming at different times." We discussed this with the registered manager who confirmed this issue had already been identified in the results of a recent survey. They explained there were times when it had been challenging due to staff absence. They assured us they would do their best to minimise this and make people aware of any changes in advance.
- Staff understood where people required support to reduce the risk of avoidable harm.
- Risk assessments were regularly reviewed and updated to ensure staff had accurate information to support people safely and effectively.

Staffing and recruitment

- The provider had processes to ensure the safe recruitment of staff. These processes had been correctly followed, ensuring only people who were suitable to work with vulnerable adults were employed.
- There were systems to ensure enough suitably trained staff were available to meet people's care needs and keep them safe. The service never used agency staff.

Using medicines safely

- Medicines were administered safely. People who required help to take medicines received support from trained staff. One person told us, "Medications are given to me correctly and staff are prompt."
- The management team carried out regular medicine audits and action had been taken where issues had been identified.

Preventing and controlling infection

- The service had an infection prevention and control policy in place. Additional guidance in relation to infection prevention and control during the pandemic was introduced to provide staff with current information about COVID-19.

- Staff had received training in infection prevention and control, including donning and doffing of PPE. Staff told us they were supplied with enough PPE to undertake their work safely. People confirmed that staff always wore PPE.
- The provider was accessing regular testing for staff.

Learning lessons when things go wrong

- Accidents and incidents were reported and recorded appropriately. These were analysed to look for any patterns or trends and lessons learnt to keep others safe in the future.

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's care needs were assessed when they started to use the service and reviewed regularly. One person told us, "All the staff are pleasant and polite. An assessment happened a while ago, I can't remember how long exactly. Carers always do as I say."
- Care records included information about people's choices and staff were aware of individual's preferences. One member of staff told us, "I would ask people during assessments what was important to them and ensure that this would be included in their care plans as I write them."

Staff support: induction, training, skills and experience

- Training was up to date and staff had the skills and knowledge to carry out their role effectively. New staff were provided with an induction programme to ensure they could carry out their role safely and competently.
- Many of the staff we spoke with felt well supported. One member of staff told us, "The support that the management offer their staff is amazing, nothing ever seems a trouble to them."
- Some staff supervisions were taking place. Staff we spoke with had differing experiences of supervision and the pandemic had some impact on supervision meetings taking place. One member of staff told us, "During lockdown we had supervision in groups but [the provider] have said we can have individual ones if we need to."

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

- Staff provided support with food preparation where people required it. Staff had received training to prepare food safely and people were happy with their support in this area.

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 have access to a range of healthcare professionals to help ensure they remained healthy.
- Staff had a good understanding of the people they were caring for and how to manage any health-related concerns. One member of staff told us, "I'd always seek medical assistance if I thought it was needed. On one occasion there was an issue with one of my clients, they had a vaccine and weren't well. I'd ring 999 if it was an emergency."

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.

- There was nobody under a Court of Protection order at the time of our inspection. Consent was obtained prior to care being delivered. One member of staff told us, "I always ask permission and consent from clients before I carry out any tasks."

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

- Most of the people we spoke with were happy with the care provided. One person told us, "All the staff are pleasant and polite. Carers spare five minutes to talk to me."
- The provider ensured staff had training on equality and diversity. Care plans contained information about people's religious and cultural needs. Information about any additional needs people may have, for example due to sensory loss, was also included.

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

- Staff encouraged people to make decisions about their day to day routines and their care needs, in line with their personal preferences. One member of staff told us, "I always ask clients what they would like and give them a range of choices especially with meals. If they are unsure what they like when it comes to dressing clients, I always show them what clothes they have and allow them to choose which is best for them."
- People had access to advocates if this was required. An advocate helps people to access information and be involved in decisions about their lives.

Respecting and promoting people's privacy, dignity and independence

- The registered manager and staff respected and promoted people's privacy and dignity. One member of staff told us, "I always speak or knock before entering a room. I ask before touching people in any way and make sure curtains and doors are closed before supporting them to wash or dress"
- Staff encouraged people to maintain their independence whenever possible. One person told us, "Staff help me to maintain independence and encourage me to have a conversation. They generally help in the areas I need help with."
- People's information was stored securely and used appropriately in line with the provider's confidentiality policy and government regulations.

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.

Improving care quality in response to complaints or concerns

- The provider had a complaints procedure in place. People gave us mixed feedback on how well complaints were dealt with. Whilst some of the people we spoke with felt action had been taken to address their concerns, others did not. One person told us, "I did complain but no one took it seriously, so I felt there was no point." We shared feedback with the registered manager who agreed to speak with the people concerned and look at how complaints could be handled better in the future.

We recommend the provider reviews their current system for logging and handling complaints in line with best practice.

Planning personalised care to ensure people have choice and control and to meet their needs and preferences

- People received care and support that was focused on their individual needs, preferences and what was important to them. Care plans contained information to support staff with this.
- Some care plans required further information to ensure a full picture of the person's needs was accurately recorded. We were assured by the registered manager this would be quickly addressed.
- The registered manager and staff understood the importance of promoting equality and diversity and respecting individual differences.

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 management team ensured people's communication needs were assessed and any measures put in place to support them. Care plans contained relevant information about people's communication needs and information could be provided in different formats if this was required.

End of life care and support

- One person was receiving end of life care at the time of our visit. Staff had received some training in this area, but the registered manager was looking into further specialist training as they would like to deliver more support in this area.

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

- Most of the staff we spoke with felt supported by the management team and office staff. Although staff meetings had not always been possible due to the pandemic, communication continued utilising newsletters and a private Facebook page.
- The service had systems in place to ensure people's individual support needs were met, including a detailed and person-centred approach to care planning.

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 understood their duty of candour responsibilities. They had submitted notifications to CQC in line with legal requirements.
- The registered manager was open and responsive to our inspection feedback and keen to make improvements where issues were highlighted.

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

- The registered manager undertook a range of audits and checks on a regular basis to help ensure high standards were maintained. Where issues were identified steps were taken to make improvements. One example of this was the electronic system which did not always synchronise reliably. As a result, alternative systems were being looked into.
- Spot checks were done to ensure staff were arriving at calls on time, in the correct uniform and PPE and delivering care in an appropriate way.

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

- The provider had a clear and comprehensive policy on equality and human rights. We saw evidence within people's care records that this policy was followed. People were treated with respect and as unique individuals.
- The provider asked people for feedback in the form of questionnaires. However, the response to this had not been very high. Some of the people said they had not received questionnaires and the registered manager was going to look at alternative ways of gathering feedback.
- The electronic care plan system was accessible to family members with the agreement of the person using

the service. One member of staff told us, "I love this system, it's so easy to use, office staff are always happy to help out if any problems arise. Also, a relative who has access to the app reported how helpful it is. It keeps them updated with their relative's daily visits."

- Staff meetings had been impacted by the pandemic, but they had not stopped altogether. One member of staff told us, "We do get together for staff meetings and you can raise issues. They have said they are going to hold more."

Working in partnership with others

- The registered manager and staff worked in partnership with health and social care professionals who were involved in people's care. One person wished to retain their independence by washing their own dishes but struggled to stand for long enough. The provider liaised with the occupational therapist to obtain equipment to assist with this.
- The provider had a good relationship with the local authority.