

Platinum Care 4U Ltd

Platinum Care 4U

Inspection report

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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?	Good ●

Summary of findings

Overall summary

About the service

Platinum Care 4U, is a domiciliary care agency registered to provide personal care to people in their own homes.

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 the inspection, five people were using the service, all of which were receiving support with personal care.

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

People told us they felt safe and staff were kind and caring. Staff understood how to protect people from harm or discrimination and had access to safeguarding adults' procedures. There were sufficient numbers of staff deployed to meet people's needs and ensure their safety. The registered manager agreed to carry out a full audit of all the staff files to check recruitment records. Following the inspection, the registered manager sent us an action plan detailing their plans to update the recruitment process.

The registered manager carried out risk assessments to enable people to retain their independence and receive care with minimum risk to themselves or others. People were protected from the risks associated with the spread of infection.

People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible; the policies and systems in the service supported this practice. People's needs were assessed prior to them using the service. The provider had arrangements for the induction of new staff and provided regular training updates for existing staff. Staff were supported by the registered manager. People's healthcare needs were monitored and detailed in their care plans. People were supported to eat and drink in accordance with their care plan.

People told us staff were caring and always showed kindness and respect. People and where appropriate their relatives had been consulted about their care needs and were closely involved in their ongoing care and support. Staff respected people's privacy and dignity. Staff demonstrated a commitment to providing dignified and compassionate support. People were supported and encouraged to maintain and build their level of independence. People and their relatives had access to a complaint's procedure, if they wished to raise a concern.

The registered manager carried out a number of audits to check the quality and safety of the service. Spot checks were carried out to monitor staff performance. People were asked for their views and any suggestions were used to improve the service and make any necessary changes.

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

Rating at last inspection

The service was registered with us on 9 September 2021. This was the first inspection of the service.

Why we inspected

The inspection was prompted in part due to concerns received about the management of the service. A decision was made for us to inspect and examine those risks.

We found no evidence during this inspection that people were at risk of harm from this concern.

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 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.

Platinum Care 4U

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 Health and Social Care Act 2008.

Inspection team

The 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.

Registered Manager

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

We gave the service short notice of the inspection. This was because it is a small service and we needed to be sure that the registered manager would be in the office to support the inspection. We also requested consent from people, their relatives and staff members to call them over the telephone.

Inspection activity started on 3 May 2022 and ended on 4 May 2022. We visited the location's office on both days.

What we did before the inspection

We reviewed information we had received about the service since it had been registered. The provider did

not complete the required Provider Information Return (PIR). This is information providers are required to send us annually with key information about the service, what it does well and improvements they plan to make. We used all this information to plan our inspection.

During the inspection

With their permission, we spoke with three people using the service, one relative and six members of staff over the telephone. We also spoke with the registered manager at the agency's office.

We reviewed a range of records. This included two people's care plans and associated records. We looked at two staff files in relation to recruitment. In addition, we looked at records relating to the management of the service including policies and procedures, staff training, audits and quality checks.

After the inspection

The registered manager sent us an action plan in response to the findings of the inspection.

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 of 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

- People were protected from the risk of abuse or avoidable harm. One person told us, "The staff make me feel comfortable and totally at ease." A relative spoken with had no concerns about the safety of their family member. They commented, "The staff are very nice, they have helped us tremendously."
- Staff understood safeguarding matters and were aware of when to report incidents and safeguarding concerns. All staff had received training in safeguarding vulnerable adults.

Staffing and recruitment

- A sufficient number of staff was deployed to meet people's needs in a person-centred way. People told us they received care from the same team of staff. This meant there was a good level of consistency and staff were familiar with people's needs and preferences.
- The provider had a recruitment and selection procedure. We noted robust checks had not always been carried out. The registered manager agreed to audit all staff files and address any shortfalls. Following the inspection, the registered manager sent us an action plan setting out updated arrangements for the recruitment of new staff.

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

- Risks to people's personal safety were assessed, monitored and managed effectively. People's care plan documentation included a series of risk assessments, which had considered risks associated with the person's environment, their care and treatment, medicines and any other factors.
- The provider had a business continuity plan which described how people would continue to receive a service in the event of adverse circumstances.
- The registered manager had completed incident forms and carried out investigations as appropriate. Lessons learned had been recorded and discussed with the staff team to ensure improvements had been made to the service. There had been no reported accidents.

Preventing and controlling infection

- The provider had systems to help prevent and control the spread of infection and staff had received training on this topic. Staff had access to an infection prevention and control policy and procedure. Staff were provided with personal protective equipment including face masks, disposable gloves and aprons as well as hand sanitiser. People confirmed staff used the equipment when providing personal care.
- The provider made sure infection outbreaks could be effectively prevented or managed. They had arrangements to alert other agencies to concerns affecting people's health and wellbeing as necessary.

Using medicines safely

- The registered manager had appropriate policies and procedures relating to the management of medicines. However, at the time of the inspection, none of the people using the service had requested support with their medication.

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

- The provider had established systems to ensure people's individual needs and choices were met. The registered manager completed an assessment prior to a person receiving a service. The assessment considered people's protected characteristics, such as sexuality, religion or belief and all aspects of their needs and choices.
- People's current needs were regularly assessed and reviewed to ensure they continued to receive the correct level of support.

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 MCA 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.

- The registered manager and staff had completed appropriate training and applied the principles of the MCA. Staff understood the need to ask people for consent before carrying out care and people using the service confirmed this approach. One member of staff told us, "It is very important we always ask people before we do anything, so they can agree."
- People had signed consent forms to indicate their agreement to the care provided. There were no restrictions placed on people's liberty.

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

- The registered manager and staff made sure people received appropriate support to meet their healthcare needs. People's physical and mental healthcare conditions were documented within their care plan. This helped staff to recognise any signs of deteriorating health.
- The registered manager and staff worked closely with other social care and healthcare professionals as well as other organisations to ensure people received a coordinated service. Appropriate information was

shared when people moved between services. In this way, people's needs were known, and care was provided consistently.

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

- People were supported to eat and drink in line with their needs and preferences.
- The registered manager explained risk assessments were carried out as necessary if people were at risk of poor nutrition and hydration.

Staff support: induction, training, skills and experience

- Staff were provided with appropriate support and training. People and a relative told us the staff were competent and well trained. One person commented, "The staff are efficient and totally professional."
- New staff were supported through an induction programme, which included the provider's ongoing mandatory training. The registered manager had obtained the necessary qualifications to enable her to deliver training.
- Staff were provided with one to one supervision and were invited to regular meetings. This facilitated discussions around work performance, training needs and areas of good practice.

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

Ensuring people are well treated and supported; respecting equality and diversity

- People's rights were promoted, and person-centred care was delivered. People and a relative expressed satisfaction with the care provided and made complimentary comments about the staff team. One person told us, "The staff are really friendly and very respectful."
- The registered manager promoted and encouraged inclusion. Staff had received training on equality and diversity issues and had access to a set of policies and procedures.
- Staff understood their role in providing people with compassionate care and support. They were knowledgeable and respectful about people's individual needs, backgrounds and personalities.

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

- People were given the opportunity to express their views about their care on an ongoing basis. This ensured they were fully involved in decisions about their care and support.
- People told us the staff understood their individual needs and preferences and always accommodated these when delivering their care. One person said, "The staff are just wonderful. They go out of their way to help me in every way they can."
- People were provided with appropriate information about the service. The information included details about what people could expect from the service.

Respecting and promoting people's privacy, dignity and independence

- People's privacy, dignity and independence was respected. Staff offered people opportunities to increase their independence and to have freedom and control over their lives.
- Staff had access to policies and procedures and training about caring for people in a dignified way. This helped to make sure staff understood how they should respect people's privacy and dignity in a care setting.
- Staff understood their responsibilities for keeping people's personal information confidential. People's information was stored and held in line with the provider's policies and current legislation.

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.

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

- People received personalised care and support specific to their needs and preferences. People told us they were happy with their care and staff responded to any requests made for assistance. One person told us, "I can't fault them in any way. They are always so helpful and kind."
- Care plans and risk assessments were in place to show the support people needed and these were reviewed regularly. Care plans were person centred and detailed people's cultural needs. They contained detailed information about people's individual support needs and what outcomes they would like to achieve.
- Staff understood people's needs and it was clear people were supported to make choices and to take control of their daily lives. Staff documented the care people had received, in a respectful way.

Meeting people's communication needs

Since 2016 all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard. The Accessible Information Standard tells organisations what they have to do to help ensure people with a disability or sensory loss, and in some circumstances, their carers, get information in a way they can understand it. It also says that people should get the support they need in relation to communication.

- The registered manager and staff understood the Accessible Information Standard. People's communication needs were identified and recorded in their care plans. Information was available in a variety of formats and in a way people could understand.

Improving care quality in response to complaints or concerns

- People had access to a complaints' procedure. The procedure was clear in explaining how a complaint could be made and reassured people their concerns would be dealt with.
- The registered manager had ensured complaints had been investigated and resolved.

End of life care and support

- The registered manager and staff completed training on end of life care and worked closely with the person, family and other health and social care professionals to ensure the person's dignity and comfort.

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.

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

- The registered manager and staff had a clear understanding of their roles and contributions to service delivery. We found staff morale was good and they felt valued and respected.
- The registered manager had established systems to monitor the quality of the service.
- The registered manager utilised various communication systems with staff, to ensure continuous learning and improvements took place. Staff told us they were comfortable in raising any issues or concerns and confirmed the registered manager was open to feedback.
- People and staff spoke positively about the way the service was managed and the registered manager's leadership style. One staff member told us, "[The registered manager] is very supportive. She is always available and does the best she can to help everyone."

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 and acted on the duty of candour responsibilities. She promoted and encouraged candour through openness. Good relationships had been developed between the registered manager, staff and people who used the service.

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

- The registered manager and staff promoted the provision of person-centred care to achieve the best outcomes for people.
- Staff told us they felt everyone was receiving a good service and they all commented on how much they enjoyed their work. One staff member told us, "I'm really happy in my job. I like looking after people and making them happy."
- People were supported in a sensitive and kind manner. Feedback from people was positive and evidenced they felt included and listened to.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Working in partnership with others

- Staff involved and engaged people in the service and considered their equality characteristics.
- People were actively consulted about their care and the operation of the service. People and their

relatives were given the opportunity to complete satisfaction questionnaires on a regular basis. We looked at a sample of the returned questionnaires and noted people had indicated a high level of satisfaction.

- The registered manager and staff worked in partnership with external agencies to learn and share knowledge which promoted the continued development of the service.