

Prestige Nursing Limited

# Prestige Nursing Blackpool

## 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

This inspection visit took place on 25 June 2018 and 2 July 2018 and was announced. This is the first inspection since the service moved to a new location.

At this inspection we found the service was rated Good.

Prestige Nursing Blackpool is a domiciliary care agency. It provides personal care to people who live in their own homes. The service covers a wide range of dependency needs including adults, children, people with a learning disability, people with mental health problems, people living with dementia and older people.

At the time of our inspection Prestige Nursing Blackpool was providing a service to 20 adults and children.

There was a registered manager in place. A registered manager is a person who has registered with CQC to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run. Having a registered manager is a condition of registration with CQC.

Although people had limited verbal communication and were unable to converse with us, we were able to speak with the relatives of five people. They told us staff safely supported and cared for their family member. They said they were friendly and caring. One relative said, "Prestige staff provide a high standard of care. I am very happy with them."

Most areas of recruitment and selection had been carried out safely before new staff could start working for the service. However, on the first day of the inspection a complete work history had not always been asked for. This had been rectified by the second day of the inspection.

There were procedures in place to protect people from abuse and unsafe care. Risk assessments were in place which provided guidance for staff. This minimised risks to people. Staff supported people with and managed medicines safely. People we spoke with told us they were competent in the support they gave with medicines.

There were safe infection control procedures and practices and staff had received infection control training. Staff wore protective clothing such as gloves and aprons when needed. This reduced the risk of infection.

Relatives told us their family member was supported by the same group of staff who they knew and liked. They told us they had confidence in their staff team as they were knowledgeable and were familiar with their needs and preferences.

Staff had received training in how to care for people which assisted them in carrying out their roles.

Staff supported people to have a nutritious dietary and fluid intake. They had been taught to carry out complex nutritional support to assist people with their specialist nutritional needs.

Staff received regular training and were knowledgeable how to support and care for people. They had the skills, knowledge and experience to provide safe and effective support.

Staff understood the requirements of the Mental Capacity Act (2005). People who received support consented to care where they were able. Where people lacked capacity, appropriate best interests' decisions were carried out.

Care plans were in place detailing how people wished to be supported. People who received support where possible or their relatives had been involved in making decisions about their care.

People we spoke with knew how to raise a concern or to make a complaint. The complaints procedure was available to them and they told us any concerns were listened to and acted upon.

The registered manager and senior staff monitored the support staff provided to people. They checked staff arrived on time and supported people in the way people wanted. Audits of care records and risk assessments were carried out regularly.

People and their relatives were encouraged to complete surveys about the quality of their care. They told us they were pleased with the support they received.

## 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.

On the first day of inspection recruitment some staff employment histories were limited. This was rectified by the second day.

There were suitable procedures in place to protect people from the risk of abuse.

Senior staff carried out risk assessments including risks to the people they supported, and of the home environment. Written plans were in place to manage these risks.

Staff had good infection control practice to reduce the risks of cross infection. There were processes for recording accidents and incidents.

Medicines were managed safely and given as prescribed.

### Is the service effective?

Good ●

The service was effective.

Staff were skilled and knowledgeable. This helped them to provide support in the way the person wanted.

The registered manager and staff demonstrated their understanding of the Mental Capacity Act.

People were supported with good nutrition and appropriate healthcare.

Staff had sufficient time to support people and provided safe and effective care.

### Is the service caring?

Good ●

The service was caring.

Relatives spoken with were pleased with the support and care their family member received. They said staff respected their

privacy and dignity and they were treated with kindness and compassion.

People supported and their relatives were involved in making decisions about their care and the support they received.

Staff knew and understood the likes, dislikes and preferences of people who received care and support. They were aware of and met each person's diverse cultural, gender and spiritual needs.

### **Is the service responsive?**

**Good** ●

The service was responsive.

People's care plans reflected their preferences, needs and wishes. They had been developed with them and their family to identify what support they required and how they would like this to be provided.

Staff were knowledgeable about how to support people according to their preferences.

People and their families told us they knew their comments and complaints would be listened to and acted on effectively.

People's end of life wishes had been discussed and documented where they were willing to discuss this.

### **Is the service well-led?**

**Good** ●

The service was well led.

Staff encouraged people they supported and relatives to air their views, suggestions and comments.

A range of audits were in place to monitor the health, safety and welfare of people. and assess the quality of service people received. Action was taken to make improvements, where applicable.

The service had clear lines of responsibility and accountability. Staff understood their role and were committed to providing a good standard of support

# Prestige Nursing Blackpool

## Detailed findings

### Background to this inspection

We carried out this comprehensive inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection checked whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

This comprehensive inspection visit took place on 25 June and 2 July 2018 and was announced. We gave the service 48 hours' notice of the inspection visit as, we needed to be sure we could speak with the registered manager and office staff.

The inspection team consisted of an adult social care inspector.

Before our inspection on 25 June and 2 July 2018 we reviewed the information we held on the service. This included notifications we had received from the provider, about incidents that affect the health, safety and welfare of people the service supported. We also checked to see if any information concerning the care and welfare of people who used the service had been received.

We contacted the commissioning department at Blackpool council, Lancashire County Council, and Blackpool Clinical Commissioning Group and Healthwatch Lancashire. Healthwatch Lancashire is an independent consumer champions for health and social care. This helped us to gain a balanced overview of what people experienced accessing the service.

As part of the inspection we used information the provider sent us in the Provider Information Return. This is information we require providers to send us at least once annually to give some key information about the service, what the service does well and improvements they plan to make.

During the inspection we spoke with a range of people about the service. They included five relatives of people who received care and support. We also spoke with the registered manager and six office staff and care staff. We visited the office location on 25 June 2018 and 02 July 2018 and looked at the care records, risk assessments and medicines information of three people, staff recruitment and staff supervision records of three staff, staff training matrix and staff and service user rotas. We looked at records relating to the

management of the service and quality assurance monitoring. We also checked the office base to see it was a safe workplace.

## Is the service safe?

### Our findings

Although people who used the service had limited verbal communication and were unable to converse with us, we were able to speak with the relatives of five people supported by the agency. We saw people supported had complex care needs and needed staff trained in specific health support to assist them. Relatives who spoke with us told they felt staff supported their family member safely and competently. A relative said how impressed they were with Prestige Nursing Blackpool and they compared very favourable to other agencies. Another relative told us, "The staff know what they are doing and are careful and thorough." We also spoke with commissioners of the service who felt Prestige Nursing Blackpool provided a good and reliable service.

We looked at the recruitment procedures and recruitment information for three staff who had been employed by the agency. On the first day of the inspection, the application forms had only a limited employment history. By the second day of inspection the application forms had been amended and information updated. We spoke with staff who said their recruitment had been robust. A Disclosure and Barring Service (DBS) And references had been received and all checks completed before the new member of staff could start work. These checks are made by an employer to reduce the risk of employing unsuitable staff.

Care plans seen had risk assessments in place to identify potential risk of accidents and harm to staff and people in their care. These provided instructions and guidance for staff, assisted them in providing the right care and minimised risks to people. Risks were assessed for the person as well as for environmental risks in the person's home. They had been kept under review with the involvement of each person and their relatives so the support was appropriate to keep the person safe.

There were procedures in place to minimise the potential risk of abuse or unsafe care. The staff we spoke with understood their responsibilities to report any unsafe care or abusive practices. They told us they would report any unsafe care or abuse if they became aware of this. Staff had received safeguarding children and adults training and they explained the actions they would take. We could see they had the knowledge to reduce the risk for people from abuse and discrimination. There had been no safeguarding alerts raised about the service since registration at this location.

There were procedures in place for dealing with emergencies and unexpected events. People had contact details for the on-call rota that people could use in emergencies or if they had unexpected additional care needs. We looked at how accidents and incidents had been managed by the service. We found these were few, but where they occurred any accident, incident or 'near miss' had been reviewed to see if lessons could be learnt and shared these with the staff team.

We looked at how the service was staffed to see if people's care and support was provided when they needed it. We also checked staff arrived when they should and stayed for their allocated length of time. We looked at staff rotas and the times people were supported. We spoke with people's relatives and with staff. They all told us the staff support met their needs and the staff stayed the full agreed times.



We asked people we spoke with if staff had enough time on visits to support their family member as they needed. They were positive about the care and assistance received and said they did not 'rush through' the care. They told us they felt they could trust the staff to carry out care well and were able to have a break from caring when staff were there. Staff said they had sufficient time to provide the care and support people needed at each visit. One member of staff said, "We support people with complex needs and support them on lengthy visits. We have the time to spend with them."

We looked at the procedures the service had in place for assisting people with their medicines. Relatives told us the arrangements for medicines were good and they were confident their family member received their medicines correctly. Staff told us they prompted people to take their medicines and were also involved in administering their medicines. Records we checked were complete and staff had recorded the support they had provided people to take their medicines. Staff received medicines training and competency checks and audits were carried out to monitor that staff gave medicines safely.

Staff had received infection control training and understood their responsibilities in relation to infection control and hygiene. They used personal protective clothing such as disposable gloves and aprons if providing personal care.

## Is the service effective?

### Our findings

We saw evidence the provider was referencing current legislation, standards and evidence based on guidance to achieve effective outcomes. This supported the service to ensure people received effective, safe and appropriate care which met their needs and protected their rights.

Care plan records confirmed a full assessment of people's needs had been completed before the person started to receive care. Following the assessment, the service in consultation with the person and their family had produced a plan of care for staff to follow. These had been kept under review to ensure the information was up to date and appropriate.

Care plans seen confirmed people's dietary needs for health or culture had been assessed and any support they required with their nutrition documented. Where people had complex nutritional needs, staff received specialised training to support them appropriately. Staff spoken with during our inspection confirmed they had received training in food safety and were aware of safe food handling practices.

Relatives told us staff provided effective support. They told us staff knew and understood their family member's care needs and preferences. A relative said, "We have the same group of staff who are able to support [family member] with their complex health problems well." Staff assisted families to monitor people's healthcare needs as part of the care planning process. Care records seen demonstrated input from staff was informative and noted any changes in health. Staff also updated people's relatives before they ended their visit. Where staff were involved in health appointments or meetings with people's relatives and health professionals, they shared information about people's needs. This meant they all had information about people's care needs so that the right care or treatment could be provided. Comments from other professionals included that Prestige Nursing Blackpool were always very reliable and prompt with communication.

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. We looked at how the home gained people's consent to care and treatment in line with the Mental Capacity Act (MCA). People had 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 mental capacity had been considered and was reflected in their care records.

We spoke with six staff and looked at training records. All staff had achieved national qualifications in care and were knowledgeable about different areas of care. We saw and staff told us they had an informative face to face induction as well as e-learning before they began caring for people. They also worked closely with other carers so they knew how care was delivered to individuals. Other training included; safeguarding, moving and handling, the Mental Capacity Act, equality and diversity, infection control, food safety, first aid, epilepsy and supporting people with specific complex care. This training assisted staff in providing appropriate care, particularly to people with complex physical needs.

Staff told us they received training that was relevant to the care needs of the people they supported. One member of staff told us, "The training is really good and we have great support." Another member of staff said, "Our training is really good. I am supporting someone with very complex needs. I have been given training so I can confidently provide complex care."

The service provided equality and diversity training to all staff as part of their induction and this was refreshed annually. The registered manager said the training taught staff to respect people's individual beliefs including religion, culture and sexuality. This confirmed the service could accommodate diversity in the workplace and create a positive and inclusive environment.

Staff told us and records confirmed they received regular formal supervision where they discussed their work and development with their manager. Senior staff explained supervisions were carried out in a variety of ways, including observing the way a member of staff supported a person as well as one to one formal discussions. Staff told us they were encouraged to discuss ideas and any concerns, their training needs and any support they needed in their role. They felt this made them more effective carers.

## Is the service caring?

### Our findings

Staff had a good understanding of protecting and respecting people's human rights. They talked with us about the importance of supporting people's different and diverse needs. This included checks of protected characteristics as defined under the Equality Act 2010, such as their religion, disability, cultural background and sexual orientation. Care records seen had documented people's preferences and information about their backgrounds and considered the support needed to maintain their individuality, independence and live a meaningful life. Staff we spoke with had a sensitive and caring approach when talking about the people they supported.

Care plans seen and discussion with relatives about their family members confirmed they had been involved in the care planning process. The plans contained information about people's needs as well as their wishes and preferences for their care and leisure activities.

We spoke with the registered manager about access to advocacy services should people require their guidance and support. Most people supported had close family involvement but the service had information details for people and their families if this was needed. Advocacy services offered independent assistance to people if they wanted them to act on their behalf or give support to make decisions about what was important to them.

People we spoke with told us staff were caring and helpful. They told us they were pleased with the support their family member received. One relative said the agency could not always provide familiar staff for their family member. However, they added that this was not very often. Other people said they almost always had the same group of staff. One relative said, "Only if a member of staff goes off sick suddenly do I get anyone else and they come with a staff who knows [family member]." A relative told us, "Prestige are great, so caring, a breath of fresh air. I couldn't be happier." Another relative said, "Prestige are reliable, professional and really care."

Relatives told us staff spoke with their family member in a friendly, polite and respectful way. One person we spoke with said, "They respect [family member's] privacy and dignity and look after them well." Another relative said they had requested the gender of staff they wanted to support their family member and this had been acted on.

Before our inspection visit we received information from external agencies about the service. They included the Clinical Commissioning Group (CCG) and the commissioning department at the local authority. Links with these external agencies were good and we received positive feedback from them about the care provided. They told us they were pleased with the care Prestige Nursing Blackpool staff provided and had no concerns.

## Is the service responsive?

### Our findings

We asked relatives what arrangements the service had taken to identify, record and meet people's communication and support needs. They told us there had been a thorough check before Prestige Nursing Blackpool staff started to provide care. They made sure they were familiar with people's ways of communication, particularly where they had complex needs. Where people used communication aids and other technology staff made sure they were familiar with these.

We looked at three people's care records. Care plans seen confirmed the assessment identified people's needs including the ways the person communicated. These were informative and personalised. They provided guidance on how staff were to support people with their daily routines and personal care needs. We saw care plans were regularly reviewed and updated in response to any changes in care or circumstances.

People who spoke with us told us staff took their family member's preferences into account when providing care. They told us staff listened and encouraged them to make choices and decisions about their care and support where they could do so. They told us staff always stayed for their full time and sometimes longer. They said staff didn't miss visits and always told them if they might be late.

We saw the service had procedures to respond to emergencies. A relative said, Prestige provided support at very short notice which allowed their family member to remain at home. Comments from other people we spoke with included, "They will cover shifts at short notice, so we can do things with the family." And, "There is always someone available to speak to no matter what time of day."

The service had a complaints procedure which was made available to people they supported and their family members. The procedure was clear in explaining how to complain and reassured people these would be responded to appropriately. People we spoke with told us knew how to make a complaint if they were unhappy about anything. A relative told us they had made a complaint and it had been dealt with quickly and to their satisfaction. They added they felt comfortable about talking to the registered manager if they had any concerns. Other people said they had no issues but would feel confident discussing any concerns with the registered manager.

Prestige Nursing Blackpool supported children and adults with complex and life limiting illnesses. People's end of life wishes had been recorded where agreed with families so staff were aware of these. Staff supported people who were heading towards end of life so they could remain in the family home with familiar people.

## Is the service well-led?

### Our findings

People we spoke with told us it was easy to get in touch with the registered manager and office staff team. They said they were approachable and open to ideas. They told us they could ring or go into the office to discuss things as they needed. We saw one person had written to the agency and said, 'You have shown me what social care should be like, client centred not agency centred. It has been heaven.' Another person commented to other professionals that they were impressed with Prestige Nursing Blackpool and that they appeared significantly more organised than others."

We found the service had clear lines of responsibility and accountability. The registered manager and staff team were experienced, knowledgeable and familiar with the needs of the people they supported. A professional spoken with told us they were confident with the way Prestige Nursing Blackpool worked as they only took on care packages if they had enough staff to provide a good service and stability to the service user.

Discussion with the registered manager and staff team confirmed they were clear about their role and provided a well-run and consistent service. All staff spoken with were committed to providing the best possible service. One staff member said, "I absolutely love working here and enjoy my role. I feel trusted and valued by the manager."

The organisation had systems and procedures in place to monitor and assess the quality of their service. Monitoring checks were carried out by senior care staff. These were to confirm staff were punctual, polite and respectful and that they stayed for the correct amount of time allocated.

The registered manager and senior managers carried out frequent audits where the services medication procedures, care plans, infection control and staffing levels were monitored. Actions had been taken as a result of any omissions or shortcomings found so continuous improvement could be maintained.

Staff told us they felt supported by the manager and management team and could speak with the registered manager and office based staff anytime. They felt they could contribute to the way the home ran through staff meetings, training, supervisions and daily handovers. Prestige Nursing Limited had an intranet service where staff could access news and information. There were also regular newsletters and other information so they could keep up to date with any new information or changes in care.

The service worked in partnership with other organisations to make sure they followed current practice, providing a quality service and the people in their care were safe. These included healthcare professionals such as, dieticians, speech and language therapists and tissue viability nurses. This ensured a multi-disciplinary approach had been taken to support care provision for people in their care to receive the appropriate level of support. They learnt from incidents that had occurred and made changes in response to these to improve care and safety.

This is the first rated inspection of Prestige Nursing Blackpool since the location moved to new premises.

Providers are expected to place on display in the conspicuous area of their premises and their website their CQC rating once received. This has been a legal requirement since 01 April 2015.