

Priority Plus Care Ltd

Priority Plus Care

Inspection report

Kings Court Business Centre
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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

Priority Plus Care is a domiciliary care agency providing the regulated activity of personal care to people living in their own homes. At the time of our inspection there were 2 people using the service.

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.

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

People received safe care from staff who knew them well. There was a safeguarding policy in place and the registered manager and staff knew how to identify and report any concerns. There were enough staff to meet the needs of people using the service. We have made a recommendation in relation to the recruitment of staff.

Staff had been inducted and provided with training to enable them to meet people's needs. We saw supervisions, spot checks, competency checks and meetings for staff were carried out and staff told us they felt supported by the registered manager. People received their medicines by trained staff where required.

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 carried out an assessment of people's needs and how they liked to be cared for. Care plans included guidance for staff on how to meet those needs. People told us staff were kind and caring and knew their needs well. People's nutritional needs were met, they were supported to maintain a balanced diet where required.

We received positive feedback about the leadership and management of the service. There were systems in place to monitor, maintain and improve the quality of the service.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk
This service was registered with us on 7 December 2021 and this is the first inspection.

Why we inspected

This inspection was prompted by a review of the information we held about this service.

Recommendations

We have made a recommendation about the providers recruitment processes.

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?

The service was safe.

Details are in our safe findings below.

Good ●

Is the service effective?

The service was effective.

Details are in our effective findings below.

Good ●

Is the service caring?

The service was caring.

Details are in our caring findings below.

Good ●

Is the service responsive?

The service was responsive.

Details are in our responsive findings below.

Good ●

Is the service well-led?

The service was well-led.

Details are in our well-led findings below.

Good ●

Priority Plus Care

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 1 inspector.

Service and service type

This service is a domiciliary care agency. It provides personal care to people living in their own homes.

Registered Manager

This provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations.

At the time of our inspection there was a registered manager in post.

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 the provider or registered manager would be in the office to support the inspection.

Inspection activity started on 31 January 2023 and ended on 10 February 2023. We visited the location's office on 2 February 2023.

What we did before the inspection

We reviewed information we had received about the service. We used the information the provider sent us in the provider information return (PIR). This is information providers are required to send us annually with key

information about their service, what they do well, and improvements they plan to make. We used all this information to plan our inspection.

During the inspection

We spoke with the nominated individual. The nominated individual is responsible for supervising the management of the service on behalf of the provider and the registered manager. We reviewed a range of records. This included 2 people's care plans and 1 person's Medication Administration Record [MAR]. We looked at 4 staff files in relation to recruitment, training and supervision. We looked at a sample of the service's quality assurance systems including medication and care plan audits.

Following the inspection, we continued to seek further clarification from the registered manager to validate evidence found. We spoke to a further 3 members of staff via telephone and email correspondence, 1 person using the service and 1 relative to obtain feedback of their experience.

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.

Staffing and recruitment

- We looked at the services recruitment procedures. Whilst most checks had been completed including completion of application forms, obtaining references from employers and Disclosure and Barring Service (DBS) checks, there were some improvements needed in relation to recruitment processes.
- Although the registered manager had obtained references for all staff, they had not verified these in line with their own policies and procedures to ensure the references received from people were authentic. We also found gaps in 2 people's employment history.

We recommend the provider seeks advice and guidance from a reputable source and also follows their own policies and procedures in relation to their recruitment processes.

- Following the inspection, the registered manager told us they were in the process of discussing the employment gaps with both staff and would record the reasons on their personal files. The registered manager told us they were looking to recruit a dedicated recruitment officer to oversee all recruitment for the service moving forward.
- There were enough staff currently to support people's needs, and we were told staff arrive on time for people's care visits. One relative told us, "There is a 15 minute window either side of allotted attendance time allowing for traffic, which is always adhered to."

Systems and processes to safeguard people from the risk of abuse

- The registered manager had safeguarding policies and procedures in place. Staff had received training on how to keep people safe and protect people from harm.
- The registered manager was aware of their responsibilities to report safeguarding concerns to the local authority and CQC. At the time of inspection, no safeguarding concerns had been raised.
- Staff knew how to identify different types of abuse and report any concerns they had. They knew how to safeguard people from the risk of abuse. One staff member said, "You need to report it, if you don't and you cover it up you are part of it. I would report to my registered manager, if action was not taken, I would report to safeguarding and CQC."
- A person told us they felt safe, they said, "Yes, I am safe and happy. We have got to know each other quite well now." A relative told us, "I am always present when staff attend, we always feel safe when staff visit."

Assessing risk, safety monitoring and management

- Risk assessments had been completed to provide staff with guidance on how to keep the person safe and minimise risks. These were regularly reviewed to ensure they remained up to date.

- The registered manager and staff member were able to describe the risks identified to people they support and how they were able to mitigate the risk.

Using medicines safely

- Where required, people received their prescribed medicines by a trained member of staff.
- The registered manager carried out audits of people's Medication Administration Records [MAR] and carried out competency checks to ensure medicines were being given safely.

Preventing and controlling infection

- The registered manager and members of staff had completed training in infection prevention and control and were provided with the personal protective equipment (PPE) they needed. One staff member said, "PPE is always available, and the manager is always involved if it's about to run out."
- The registered manager had relevant policies in place to support effective infection prevention and control and was following current guidance.

Learning lessons when things go wrong

- The registered manager had systems in place to deal appropriately with incidents or accidents. These included an incident form to capture all relevant information and an overview log to monitor and identify any trends or themes.
- Staff knew how to report and record incidents appropriately, one member of staff told us, "We have an incident report form, I would notify the registered manager immediately, seek the appropriate assistance, complete the incident form and daily notes and notify the person's next of kin."
- The registered manager evidenced regular communication with their staff team, by carrying out spot checks and holding staff meetings. Staff confirmed they were kept informed about any changes to people's care and support needs. One staff member said, "The registered manager is very open and transparent, we discuss people we support and if there is anything which needs to be shared, any problems or concerns the registered manager will share them with us."

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 registered manager carried out an assessment of people's care and support needs prior to commencing the service. One relative told us, "An assessment was initially undertaken by the service whilst [name] was in a rehabilitation centre. On their return home the staff who were going to support [name] attended and met us to discuss their needs further."
- People's care and support needs were reviewed regularly to ensure care continued to be delivered as required. This was overseen by the registered manager in the form of telephone conversations with people and their relatives, as well as conversations and meetings held with the members of staff.

Staff support: induction, training, skills and experience

- The registered manager told us they carry out all staff induction, this included introducing new staff to the people they will be providing care to. Staff also shadowed the registered manager. One staff member told us, "I had a lot of shadowing with the registered manager. The registered manager told me if there is any training you want to do, let me know because I want you to deliver good care."
- A member of staff told us they had completed their Care Certificate. The Care Certificate is an agreed set of standards that define the knowledge, skills and behaviours expected of specific job roles in the health and social care sectors. It is made up of the 15 minimum standards that should form part of a robust induction programme.
- Staff told us they felt confident and had enough experience to carry out their role. Comments included, "I had enough training and shadowing, so I was confident to attend to the clients." And, "We get to know people's individual needs, how to support them safely. We are trained so we have experience."

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

- People were supported to eat and drink in line with their care plan where required. We saw people's dietary requirements were being supported in line with their food preferences and choices and people's allergies had been documented within their care plan.
- We saw from people's daily care notes how they were supported by staff to prepare meals and their preferred choice of where they liked to have their meals. For example, 1 person's care notes stated, I have breakfast in the lounge, and I will let you know my breakfast choice each day.

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

- The service worked effectively with other professionals when required. For example, when people's needs changed, they made referrals to health and social care professionals to ensure people received the support

they needed.

- We saw the service worked in partnership with relatives to ensure care visits were flexible to accommodate them taking their loved ones to their healthcare appointments.

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 members had completed MCA training and encouraged and supported people to make their own decisions. We saw documented evidence where people and relatives were consulted and asked for their or their family members consent before providing care and support.
- One member of staff told us, "I always involve people in decision making, for example what they would like to eat. I focus on a person's right to make their own decisions and assume a person has the capacity to make the decision. If a person lacks the capacity to make a decision and the decision needs to be made for them, it must be made in their best interests."

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

- We received positive feedback about the service and were told how kind and caring the staff team were. People received consistent care and support. One person told us, "They [carers] are always here and on time, they often stay on longer, I can rely on them, whatever I need they are ahead of me." A relative told us, "[Name's] care needs are met to a good standard, staff always treat [name] with kindness, respect and dignity."
- The registered managers ethos is about providing a service which is accessible to people with protected characteristics. This ensured the care delivered by staff met the needs of a diverse range of people with a clear understanding of how care and support may need to be adapted for those from different cultures or ethnic groups.
- Staff spoke positively about their roles and the people they care for. One staff member told us, "I always have time to talk to the person I support." And, "After providing care and support to person, we always sit down to engage in conversations, there is always enough time."

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

- People told us they knew about their care plans and they were involved in what care and support they needed. One person told us, "My assessment was carried out at home, I was involved, and the registered manager had to check staff could support me safely especially in the shower." A relative told us, "I am aware of [names] care plan, we have been provided with a copy. I am always present when staff attend, and we engage in discussion about [names] care when necessary."
- Staff told us how they supported people to be involved in making decisions about their care. One staff member told us, "I always talk to people first, to explain and gain their consent. I try to involve a person in all aspects of their care."

Respecting and promoting people's privacy, dignity and independence

- The registered manager led by example in how they spoke about people in a caring and respectful way. They had worked together with people and their relatives to ensure good outcomes for people and this was reflected in the positive feedback we received from the people we spoke to.
- Staff encouraged and promoted people's independence wherever possible. One staff member told us, "Every time before I provide care and support, I always check on how a person is and explain what I am going to do. I encourage people to do as much independently as they can. For 1 person I support they can dress themselves with minimal assistance. I ensure I am on hand if needed but promote the person's ability to manage independently."
- Staff had a good understanding of respecting people's privacy and dignity and promoting their

independence. One member of staff told us, "I always involve the person. When offering personal care, I ensure I cover their body with a towel to promote dignity, I close the door when showering or bathing for privacy."

- Confidential information about people was stored securely to promote their privacy and dignity. People had a copy of their care plan in their own home which the registered manager reviewed regularly for people and staff members to access.

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's care plans were person centred and reflective of their needs. They considered all aspects of people's care including preferred name, preferred gender of staff, health, medicines, moving and handling, personal care and nutrition and hydration requirements.
- The registered manager maintained an ongoing dialogue with people and their relatives to ensure the information remained accurate, up to date and reflective of the person's needs.
- The registered manager had carried out care reviews with people or their relatives to ensure people were happy with the care they received and to discuss any changes to their care requirements.

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 was aware of their responsibilities under the AIS. People's care plans contained information about their ways of communicating and their preferred methods. The registered manager showed me documentation in large print and easy read format available for people if they required it.

Improving care quality in response to complaints or concerns

- The registered manager had a system in place to record and monitor complaints.
- One relative told us, "I have a copy of the complaints procedure. There has been no occasion when a complaint has been necessary. Any minor issues have been raised and resolved at the time."

End of life care and support

- The service was not currently supporting anyone at the end of their life. However, the registered manager told us they contact the appropriate healthcare professionals. They said, "I would ensure I contacted local services for support such as, the palliative and Macmillan teams."

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

- The nominated individual and registered manager had a clear vision of the key values of the service, they told us, "Priority Plus Care promote a culture of person centred planning, we value our clients and staff, so we are all as one. We ensure staff know our values and abide by them when out in the community, as they are representing our service and its reputation."
- The service provided people and relatives the opportunity to give feedback on the service they were receiving. This was in the form of regular telephone calls, care reviews and surveys on the quality of the service being provided.
- One relative gave an example of the staff's willingness to help, they told us, "Staff are always willing to be flexible where able. On one occasion one of the staff altered their attendance time in order to assist with preparation for a hospital appointment."
- Compliments about the service were received. One relative had written, "Small team of carers, enabling them to build relationships and for [name] to be comfortable in their care. The communication and support from the registered manager have been 1st class. The whole team have been reliable considerate and respectful."
- A staff member said, "The manager is very supportive. They always engage with staff to ensure the best care is being delivered and staff are happy."

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; Continuous learning and improving care

- The registered manager acknowledged when things had gone wrong and they were open and honest with people and relatives. For example, where a complaint had been received the registered manager followed up on the concern, they had shared information to their staff and followed up with additional training and reflective practice. This had then been communicated back to the relative who was satisfied with the outcome.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Working in partnership with others

- The registered manager understood their responsibility to notify us of any incidents relating to the service. These notifications tell us about any important events which have happened at the service. At the time of our inspection there had been no incidents to report.

- The registered manager was in regular contact with people using the service and their relatives to ensure the care being provided was meeting their needs. The registered manager also gathered feedback in the form of surveys, telephone calls and care reviews regarding the overall quality and experience of care people received.
- Staff told us they received supervisions, had regular contact with the registered manager and were kept updated with any changes to a person's care and support needs. One staff member told us, "Our meetings are held every six to eight weeks. At the meetings we are provided with updates on how everything is going and if there are any changes. We also discuss our clients and if there is anything which needs to be shared any problems or concerns. We are then given a chance to talk about any other issues."
- The registered manager and staff members worked alongside other agencies to meet people's needs and liaised with other healthcare professionals such as the GP, District Nurses, Occupational therapists.