

Premier Care Limited

Premier Care Bolton Branch

Inspection report

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Overall rating for this service	Good •
Is the service safe?	Good
Is the service well-led?	Good

Summary of findings

Overall summary

About the service

Premier Care is a domiciliary care agency providing help and support to people with varying needs 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 social care provided. At the time of our inspection the service was supporting 197 people, 148 of whom were receiving help with personal care.

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

At the previous inspection there were concerns around inconsistent and brief documentation. This had improved and documentation was now much more comprehensive. At the last inspection there were some inconsistencies in medicines records. At this inspection all medicines records looked at were complete and up to date.

We found systems for assessing quality were not always effective at the last inspection. These systems had been reviewed and improvements made had ensured they were now effective.

Appropriate safeguarding systems were in place and staff were knowledgeable about how to keep people safe. Staff were recruited safely and no missed visits were reported by people who used the service. Infection prevention and control was managed well.

Care plans were person-centred and included information about health, social background, preferences and goals. People reported good communication with the service.

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.

Learning was taken from looking at themes and trends from complaints and concerns, accidents and safeguarding issues. The service engaged well with partner agencies and other professionals.

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

Rating at last inspection

The last rating for this service was requires improvement (published 28 April 2020). At this inspection we found the required improvements had been made.

Why we inspected

This was a planned inspection based on the previous rating to look at whether the service had completed the actions required.



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 well-led?	Good •
The service was well-led.	



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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 one inspector.

Service and service type

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

The service had a manager registered with the Care Quality Commission. This means that they and the provider are legally responsible for how the service is run and for the quality and safety of the care provided.

Notice of inspection

Inspection activity started on 24 March 2021 and ended on 26 March 2021. We visited the office location on 25 March 2021

What we did before the inspection

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

We spoke with seven people who used the service and ten relatives about their experience of the care provided.

During the inspection

We spoke with six members of staff including the regional manager, the registered manager, and four care staff.

We reviewed a range of records. This included ten people's care records and multiple medication records. We looked at three 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 training data and quality assurance records. We contacted three professionals who regularly visit the service.



Is the service safe?

Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm.

At the last inspection this key question was rated as requires improvement. At this inspection this key question has now improved to good. This meant people were safe and protected from avoidable harm.

Staffing and recruitment

At the last inspection we recommended that staff met people's assessed needs by visiting at the times required and that people were made aware of when this would be.

- People we spoke with reported no missed visits and said visits were now timely. One relative said, "They [staff] are lovely, [relative] loves them coming out. They are usually on time, late once in a blue moon and they have never missed a visit." A person who used the service told us, "The service has got better with sending familiar staff, I can't grumble."
- Staff we spoke with felt there were usually enough staff cover for sickness and annual leave.
- Staff files included all appropriate documentation to help ensure people were recruited safely.

Assessing risk, safety monitoring and management

At the previous inspection documentation around risk was found to be brief.

- Improvements had been made to risk assessments and they now included more complete information.
- There was an up to date health and safety policy and all staff had completed training in this area.

Using medicines safely

At the last inspection there were some inconsistencies in medicines records, which had been identified in an internal audit.

- Medicines records we looked at were complete and up to date and we found no inconsistencies.
- Medicines audits were completed regularly and action taken to address any issues identified.
- Staff had completed appropriate medicines training and there was evidence of regular competence checks to ensure staff knowledge and skills remained effective.

Systems and processes to safeguard people from the risk of abuse

- The service had an appropriate and up to date safeguarding policy and procedure.
- A safeguarding log was in place, with actions and outcomes recorded.
- Staff we spoke with had completed regular safeguarding training. They demonstrated a good understanding of safeguarding issues and were confident around recognizing and reporting any concerns

Preventing and controlling infection

- The service had robust procedures in place for the prevention and control of infection.
- There were procedures for visitors to the office to follow, communicated via posters at the entrance.
- Staff were aware of infection control requirements and had completed extra training to address issues relating to COVID-19. People told us staff always wore personal protective equipment on visits.

Learning lessons when things go wrong

• Lessons learned from analysis of accidents and incidents, safeguarding concerns and complaints were shared with staff. This was done via staff meetings or individual supervisions, depending on the issue found, and appropriate changes were made where necessary.



Is the service well-led?

Our findings

Well-Led – this means we looked for evidence that service leadership, management and governance assured high-quality, person-centred care; supported learning and innovation; and promoted an open, fair culture.

At the last inspection this key question was rated as requires improvement. At this inspection this key question has now improved to good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements

At the last inspection we recommended that the provider continue to embed effective audit systems to promote safe and high-quality care.

- Systems for monitoring the quality of care provision had improved and quality was now assessed effectively.
- A number of audits were in place, including audits of documentation, and issues identified were addressed with appropriate actions.
- Documentation had improved and was now of a consistently good standard.
- Service user and relative surveys were sent out regularly. We saw the results of the most recent telephone survey, completed by head office. This evidenced people's satisfaction with all aspects of care provided. Comments included, "Cannot thank Premier enough", and "Carers are the best".

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

- Care plans were person-centred and included information around people's health and social backgrounds. People's preferences, likes, dislikes and interests were recorded and applied to care provided.
- Care plans also included people's goals and outcomes to help ensure they were supported to reach these targets.
- People told us they could choose how their care was delivered. One person said, "I get choices in how I am helped." A relative told us, "They chat with [relative] and are lovely with her. They stay the full time and they respect her choices."

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

- The service had appropriate equality and diversity policies and procedures in place. Staff had completed training during their induction and were aware of the issues.
- People reported good communication with the service. "A person who used the service said, "I can contact the office easily. Someone came from the office last week to see if I am alright and if there was anything more they could do." A relative said, "I can get hold of the manager easily, she is very, very accessible. She has made follow up calls to me when [relative] came home from hospital to see how she is."

• Staff were well supported with regular supervision sessions and consistent communication between them and the management team. A staff member said, "Very clear guidance is given, [registered manager name] is on the ball."

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

- We saw evidence of openness within responses to complaints and concerns.
- Notifications were submitted to CQC as required.

Continuous learning and improving care

• The service ensured learning was continuous by looking at themes and trends from complaints, concerns, accidents and safeguarding issues.

Working in partnership with others

• The service engaged well with partner agencies and other professionals. One professional we contacted said, "The management team work well with me and are very forthcoming with information when requested and are helpful." Another professional commented, "I think Premier Care are a well-run organisation. They attend all the meetings and webinars and are fully engaged with us." A third professional said, "In my opinion I feel [registered manager] has the knowledge, skills and experience to run a safe, well-led service."