

Positive Homecare Limited

Positive Homecare

Inspection report

Woodlands, 51 Battery Hill
Fairlight
Hastings
East Sussex
TN35 4AP

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17 March 2017

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Website: www.positivehomecare.co.uk

Ratings

Overall rating for this service

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

We carried out a comprehensive inspection of Positive Home Care on 14 September 2016. A breach of legal requirement was found in relation to the provider notifying the Care Quality Commission (CQC) of events that affected people. After the inspection, the provider wrote to us to say what they would do to meet legal requirements in relation to the breach and told us this would be completed by the end of October 2016.

We undertook this focused inspection on 17 March 2017 to check that they had followed their plan and to confirm they now met legal requirements. We found improvements had been made and the provider was now meeting all legal requirements.

This report only covers our findings in relation to those requirements. You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Positive Home Care on our website at www.cqc.org.uk.

This was an announced inspection. This means the provider was given notice due to it being a domiciliary care provider and we needed to ensure someone was available. The agency provides support and care for people living in their own homes. Some people were at risk of falls and had long term healthcare needs associated with living with dementia, others had sensory impairments.

Positive Health Care provides their services within an approximate 10 mile radius from their office in Fairlight. At the time of our inspection 22 people were using the service.

There was a registered manager in post at the time of the inspection. A registered manager is a person who has registered with the CQC to manage the service and has the legal responsibility for meeting the requirements of the law; as does the provider. The registered manager was also the provider.

The provider had established quality assurance systems which enabled them to have oversight of many areas of the service provided. These had been effective in most areas however we identified some improvements to the recording of staff training. The provider took immediate corrective action to ensure these shortfalls were addressed.

The provider completed a monthly managers audit which reviewed areas such as feedback from people and their relatives, accidents and incidents and tracked which staff had undergone supervision.

Following a previous recommendation from the CQC the provider spoke positively regarding their attendance at networking and care industry events which were aimed at providing updates and sharing good practice.

The provider had made provision for unseen events which may cause interruptions to the service by establishing contingency plans which included a 'pool' vehicle.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service well-led?

Good ●

The service was well led.

The provider had fulfilled their legal obligations in regard to informing the Care Quality Commission of notifiable events.

The provider effectively used their quality assurance systems to analyse the service and identify where improvements could be made.

The provider had established links with other providers to enable sharing of ideas and good practice.

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Detailed findings

Background to this inspection

We undertook an announced focused inspection of Positive Home Care on 17 March 2017. This inspection was done to check that improvements to meet legal requirements planned by the provider after our September 2016 inspection. We inspected the service against one of the five questions we ask about services: is the service well-led? This is because the service was not meeting some legal requirements.

This was an announced inspection. Forty eight hours' notice of the inspection was given to ensure that the people we needed to speak to were available. The inspection was undertaken by one inspector. Before our inspection we reviewed the information we held about the service such as information from the public and whistle blowing enquires. We spoke with the local authority who confirmed they had no additional information that we were not already aware of.

We reviewed four people's care plans and associated records. We spoke with the provider and their care coordinator. We looked at staff's recruitment, supervision and training records, and spoke with the registered manager about the systems in place for monitoring the quality of care people received. We reviewed comments people had made in a feedback survey and looked at a variety of the service's policies such as those relating to accidents and incidents, complaints and quality assurance.

Before the inspection we reviewed the information we held about the home, including previous inspection reports. We considered the information which had been shared with us by the local authority and other people, looked at safeguarding alerts which had been made and notifications which had been submitted. A notification is information about important events which the provider is required to tell us about by law.

Is the service well-led?

Our findings

We carried out a comprehensive inspection of Positive Home Care on 14 September 2016 where we found a breach of legal requirements in relation to the provider failing to notify the Care Quality Commission (CQC) of incidents that affected people. Under the Health and Social Care Act 2008, providers are required by law to submit statutory notifications. The provider sent us an action plan and told us they would address this shortfall. At this inspection we found improvements had been made and the provider was now meeting all legal requirements in relation to notifying the CQC.

At our last inspection we identified examples where documentation was either incomplete or had not been fully updated. The examples related to gaps in some people's Medicine administration records (MAR) and staff training records were not complete. At this inspection we found the provider continued to work with staff to encourage them to complete people's MAR correctly and in line with the provider's policy. It was evident there had been improvements in the auditing of people's MAR to identify poor recording, the provider said, "We have worked hard with staff to reinforce the importance of completing MAR's correctly and it has improved but it's still work in progress." However we found there continued to be shortfalls in the recording of staff training and it was not consistently clear to the provider when staff were due to complete, update or refresh their training. The provider acknowledged they could improve how they recorded staff training and following our inspection sent the CQC a comprehensive action plan which clearly identified the training expectations of staff and when updates for individual courses were required.

We found the provider continued to effectively use their quality assurance systems to monitor the service provided. The 'managers monthly' report captured key operational data related to multiple areas such as accidents and incidents, late or missed calls, and which people's care plans had been reviewed and updated. The provider said the monthly report, "helped them keep track of changes from month to month." The report also identified what feedback had been received from people and their relatives. Where an issue had been identified the provider used the report to identify what actions had been taken as a result. For example in February 2017 there had been one missed care call and the report identified the reason why and the actions taken to prevent a reoccurrence. At our last inspection the provider had recently begun a 'service call log.' Content from all inbound calls into the office were logged. The provider had now embedded this practice into the service and we saw they were able to track historic data and clarify retrospective queries. The provider said, "It can be very helpful to refer back to if we are challenged on something because we know who took a call and when it came in."

At our inspection in August 2015 due to the size of the service we made a recommendation that the provider join a professional social care network to enable them to establish links with other providers to share best practice. At our inspection in September 2016 the provider confirmed they had set up arrangements to attend a network event but had not attended. At this inspection the provider and their care co-ordinator had attended an event and spoke positively about the experience. They said, "It was helpful and I made some contacts, one of which I may be using to deliver some training in the future."

The provider had established a range of contingency plans to offset unforeseen events such as staff

sickness, poor weather conditions and staff vehicle problems. The registered manager said, "Most clients are in rural locations so staff cars are vital." The provider had a 'pool' vehicle available to staff should their own be unavailable. The provider said, "It is useful to have and has helped us out on more than a few occasions."

As with our comprehensive inspection in September 2016 we found there continued to be a positive culture at the service.