

Zinnia Care Ltd

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Inspection report

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06 May 2016

10 May 2016

11 May 2016

13 May 2016

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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

The inspection took place on 06, 10, 11 and 13 May 2016. We gave the provider 48 hours' notice of the inspection to make sure that the people we needed to speak with were available. Zinnia Care Limited is a domiciliary care agency which provides personal care for older people in their own homes. At the time of the inspection, they had 23 people using the service.

There was a manager in post who had registered with the Care Quality Commission (CQC). A registered manager is a person who has registered with the 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 and associated Regulations about how the service is run.

At our last inspection on 17 November 2015, the service was rated as requiring improvement. At this inspection we found that the provider had made improvements to the way they monitored calls to make sure that staff arrived on time to provide care for people. Arrangements were in place to ensure there were sufficient numbers of staff available to meet people's individual needs. The provider had an electronic monitoring system that ensured that they would know if calls were late. The provider had a complaints policy and procedures in place.

Care was provided in a way that promoted people's dignity and respected their privacy. People received personalised care and support that met their needs and took account of their preferences. People's care plans were person centred and gave clear guidance to staff.

People told us they felt safe, happy and well looked after. Staff had received training in how to safeguard people from abuse and knew how to report concerns, both internally and externally. Safe and effective recruitment practices were followed to help ensure that all staff were suitably qualified and experienced to carry out their duties safely.

People were positive about the skills, experience and abilities of staff that provided care at their own home. Staff had received training relevant to their roles and had regular supervision meetings to discuss and review their development and performance.

People were supported to maintain good health and had access to health and social care professionals when necessary. They were provided with support to maintain a healthy balanced diet that met their individual needs.

Staff had developed positive and caring relationships with the people they cared for and knew them very well. People were involved in the planning, delivery and reviews of the care and support provided. The confidentiality of information held about their medical and personal histories was securely maintained in the agency office.

The provider took appropriate steps to monitor the quality of services provided, reduce potential risks and drive improvement.

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.

There was enough staff to meet people's needs.

People were kept safe by staff that were trained and knew how to recognise and respond effectively to the risks of abuse.

Safe and effective recruitment practices were followed to help ensure that all staff were fit, able and qualified to do their jobs.

People were supported to take their medicines safely by trained staff.

Is the service effective?

Good ●

The service was effective.

Staff established people's wishes and obtained their consent before care and support was provided.

Staff were well trained and supported to help them meet people's needs effectively.

People were supported to maintain with a healthy balanced diet which met their needs.

People had their day to day health needs met with access to health and social care professionals when necessary.

Is the service caring?

Good ●

The service was caring.

People were cared for by staff that knew them well and were familiar with their needs.

People and their relatives were involved in the planning, delivery and reviews of the care and support provided.

Care was provided in a way that promoted people's dignity and respected their privacy.

Is the service responsive?

Good ●

The service was responsive.

People and their relatives were confident to raise concerns which were dealt with promptly.

Detailed guidance was made available to staff and enabled them to provide care and support.

People received care adapted to their individual needs.

Is the service well-led?

Good ●

The service was well led.

Effective systems were in place to quality assure the services provided, to manage risks and drive improvement.

People, relatives and staff were all positive about the managers and how they operated.

Staff understood their roles and responsibilities and felt well supported by the management team.

Zinnia Care Limited

Detailed findings

Background to this inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection was planned to check whether the provider was meeting the legal requirements and regulations associated with the Health and Social Care Act 2012, to look at the overall quality of the service and to provide a rating for the service under the Care Act 2014.

The inspection took place on 06, 10, 11 and 13 May 2016. The inspection was carried out by one inspector. We looked at all relevant documents held at the office and on subsequent days we telephoned staff and people who used the service. Before the inspection, the provider completed a Provider Information Return (PIR). This is a form that asks the provider to give some key information about the service, what the service does well and improvements they plan to make. We also reviewed information we held about the provider including statutory notifications that they had sent us. A statutory notification is information about important events which the provider is required to send us.

During the inspection we spoke with eight people who used the service, two relatives, five staff members, the registered manager and the provider. We looked at care plans relating to four people and three staff files. We reviewed other documents relating to the management of the service.

Is the service safe?

Our findings

People told us that they felt safe and had no concerns about the staff that visited their homes. One person said, "We feel safe, we have a key safe and we know the staff." Another person said, "I feel safe, staff talk to me and ask me if I'm alright."

We asked people if they were receiving their calls on time and the feedback we received was positive. One person said, "They are all pretty much on time, sometimes delayed but the service is excellent." Another person said, "They are always on time, nothing to complain about." Another commented, "They come when they should, I am happy with the carers." Zinnia care used an electronic monitoring system that enabled them to monitor calls. The registered manager explained that they received alerts if a call was late and they responded to that immediately. We saw from a selection of calls randomly chosen that people were receiving their calls on time.

Staff demonstrated that they could recognise signs of potential abuse and they knew how to report concerns. One staff member said, "I would ask the person if they were alright, and I would always report concerns to my manager." Another staff member told us, "If I saw things weren't right, I would report this straight away." There were systems in place to allow staff safe access to people's homes. People who were not able to open the door themselves had key safes installed to enable staff access.

Where potential risks to people's health, well-being or safety had been identified, these were assessed and reviewed regularly to take account of people's changing needs and circumstances. This included in areas such as medicines, mobility, health and welfare. This helped staff to provide care and support safely but also in a way that promoted people's independence. For example, the registered manager told us about one person whose needs had changed. This had been reported by staff that were concerned that the person's mobility needs were changing. The provider completed a review and ensured the correct lifting equipment and specialist bed required to meet the person's needs was arranged.

Safe and effective recruitment practices were followed to help ensure that all staff were of good character, physically and mentally fit for the roles they performed. We saw references were reviewed by the registered manager and all relevant checks were in place before staff were allowed to start their employment.

People were supported by enough suitably experienced, skilled and qualified staff available at all times to meet their needs safely and effectively. People received support with their medicines from staff that were skilled and competent. Staff told us, and records confirmed that they had been provided with training to give them the skills and knowledge to support people with their medicines. One person said, "Staff remind me to take my medicine, or I would forget." Another person said, "They [Staff] prompt me to take my medicine." One staff member said, "I give people their medicine." Staff confirmed that they had received training and were confident to perform this task. The provider regularly audited the medication administration records (MAR) to ensure that staff had supported people with their medicines and that the MAR charts had been filled out correctly.

Is the service effective?

Our findings

People's wishes and consent were sought before providing care and support. One person told us, "They [Staff] always ask about the little things, I prefer female carers and that's what I have."

Staff understood the importance of choice. One staff member said, "I always ask what people want." Another staff member said, "I will always ask, what they would like, I hold up different choices to help people choose what to wear. If people don't want to do something, that's their choice." Staff understood the importance around having choice and supporting people to make decisions.

The Mental Capacity Act (2005) provides a legal framework for making particular decisions on behalf of people who may lack 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. Where 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 checked whether the service was working in line with the principles of the MCA. We found that where people had been assessed as not having capacity best interest meetings had been held to ensure the person best interests were met.

People were supported by staff who received the appropriate training and supervision. New staff members completed an induction programme, during which they received training relevant to their roles, and had their competencies observed and assessed in the work place. Staff received training and regular updates in a range of subjects designed to help them perform their roles effectively. This included areas such as moving and handling, medicines, and infection control. A staff member said, "I had an induction followed by three days working with other qualified staff. The training had a lot of information and written papers. We also had practical tasks and I feel confident to do my job." The field supervisor confirmed that regular spot checks were completed to ensure staff followed best practice.

Staff received training that enabled them to meet people's needs and to carry out their roles effectively in a way that was responsive to people's individual needs. For example, staff were trained and had access to information and guidance about how to care for people who lived with Dementia. One relative told us, "We have the same carers and that is really beneficial to my [Relative], I would recommend them to anyone." We saw that staff were supported with regular supervisions and yearly appraisals. Staff told us they felt confident to perform their duties and had received the relevant training. We saw that people's training was up to date. One staff member said, "I have the skills I need, I am happy with my job."

People confirmed staff supported them to eat and drink sufficient amounts. We were told this included preparing people's breakfasts and heating up meals. One person said, "They [Staff] cook my food, we have cooked meals. I get to choose what I want." Another said, "They always ask if I need my squash bottle refilled." One person told us, "I normally have a regular selection of staff and they are all well trained." We saw where one person required support with their meals there were clear instructions about putting their food on a specific plate and ensuring they had their adapted utensils. This supported the person's independence.

People were supported to access healthcare services where required. Staff confirmed that there had been occasions where they had called for GPs or district nurses to attend to people in their homes. This showed that staff knew who to contact when other professionals were required. The registered manager said, "Staff know to report any concerns or incidents to the office."

Is the service caring?

Our findings

People were cared for and supported in a kind and compassionate way by staff that knew them well and were familiar with their needs. One person told us, "Staff are caring and polite." A relative told us, "I am happy with the care."

People received care and support from staff that had guidance about people's health and care needs. People's identified needs were documented and reviewed to ensure that the care and support provided helped them to maintain good physical, mental and emotional health. We found that people and their relatives were involved with the care planning. One person said, "The [Provider] has just recently updated my care plan and I was involved, I am happy with my care." A relative commented, "We have been involved with the care plans from the beginning." Another person told us, "Staff talk to me about my care."

People who used the service told us that staff supported them with dignity and respected their privacy at all times. Staff had developed positive and caring relationships with people they supported and were knowledgeable about their individual needs and preferences. One relative said, "Staff treat my [Relative] with dignity and respect. We have built a good relationship with the staff we know them well and they know my [Relative]." Another relative commented, "I can't fault the care, the staff they are cheerful, thoughtful and work in a cheery manner." One staff member told us that they would always make sure people had their privacy maintained whilst giving personal care. This was done by closing doors or drawing curtains and always communicating what they were doing. They said, "When helping people to wash, I would use a towel to keep them warm and protect their dignity."

All people we spoke with were positive about the kindness of the staff. One person said, "They are all polite and respectful." Another person said, "I don't think you could beat the service, it is excellent. Staff know me pretty well and they take the time to talk to me." A relative said the staff were, "Sociable and they do a good job." People were happy with the staff that provided their care. One said, "They [Staff] are always in uniform and treat me with care and respect."

Confidentiality was well maintained and that information held about people's health, support needs and medical histories was kept secure. The service also provided information about local advocacy services and how to access independent advice to people using the service and relatives. The provider confirmed that no one using the service required support from an independent advocacy service at the time of our inspection.

Is the service responsive?

Our findings

People had their needs assessed prior to receiving a service to ensure that their needs could be met and people discussed what times they wished to have their calls and other preferences such as staff gender. The provider told us that they regularly saw people to discuss any needs they may have. Staff had access to information and guidance about how to support people. This included detailed information about people's preferred routines and how they liked to be supported with personal care. For example, one person whose needs had changed needed an increase in staffing support. We spoke with the person and they confirmed that they now had two carers instead of one as they now required more support with their mobility. The person said, "I can't fault the care."

People confirmed that they were always given choice, for example, what they would like to wear. One person said, "They [Staff] help me get dressed in the morning." Another commented, "Staff come in the morning to help get me up and they do my lunch." Care plans contained clear guidance for staff about the person's needs and were person centred. For example, we saw people had their background history to ensure staff were aware of their hobbies interest and who they were as a person.

The provider had a complaints procedure in place. People received relevant information that provided them with contact details and information on how to complain. One person said, "There were a few niggles initially when we first started but the manager came round for a face to face meeting and listened to what we had to say and the problems were dealt with straight away." Another person told us, "I have contact numbers but have not had any reason to complain." The registered manager told us that if there were any issues that they would see the client face to face to ensure that these were resolved. People confirmed they had contact details for Zinnia Care and knew how to raise concerns if required. We looked at the complaints log and found that complaints were documented and responded to by the provider or registered manager in line with their complaints policy.

The provider told us that people were called as part of the telephone monitoring service. This was completed on a regular basis to gain people's views about the service. We saw where these had been completed, people views were positive towards the service. The provider and registered manager told us that they also had regular contact with their clients and this enabled them to establish good relationships. For example, the provider completed regular reviews and also used this time to find out how the person felt about the care they received. People told us that they were happy with the care they received. One person said, "They [Staff] are always on time, nothing to complain about." A relative said, "They take time to talk with my [Relative]." Another person said, "The staff are very kind and they do a good job."

Is the service well-led?

Our findings

People and their relatives were all positive about the care they received. They were complimentary about the registered manager and the provider who they described as being approachable. One relative told us, "I find that Zinnia Care is very flexible especially if you give them notice. [Name] is the manager; I have spoken to them lots. They are approachable and will listen to what I have to say." One person said, "I am very happy with the service the staff are really good."

The provider told us that they felt supported by the registered manager. They had links with other organisations that provided them with training and updates to best practice. We saw that the registered manager was enrolled on training courses such as Leading and Recognising Excellence in care. They attended regular meetings throughout the year with other providers to keep abreast of best practices and ideas to help improve the service they provided. The registered manager told us they had a mentor and that they had developed networking to share ideas and best practice. The provider told us that they had recently signed up to have independent surveys completed to support people's views.

The registered manager confirmed that telephone monitoring was carried regularly to help ensure that people were happy with the service. We saw this was documented and the feedback from people had been positive. Staff told us that they always asked if people were happy with their care. The supervisor told us that they always reminded people about contacting Zinnia Care if they have any concerns. They said, "I always speak to people to check they are OK." One person said, "I feel they listen to me."

Staff had the opportunity to attend regular meetings and had the opportunity to have their say. Staff confirmed they felt the provider and the registered manager were approachable. One staff member said, "I had my supervision recently and they always ask if I need anything, I am nearly finished my national vocational qualification level two." Another said, "The managers are very approachable." We saw that meetings took place regularly to update staff this also provided opportunities for staff to express their views. Staff were actively encouraged to have their say about any concerns they had and how the service operated. One staff member said, "If there is anything I am not sure about I can contact the office anytime."

Information gathered in relation to accidents and incidents that had occurred was reviewed by the provider. There were systems in place to help monitor the quality of the service. We found that audits had been completed regularly and these were used to monitor performance, manage risks and keep people safe. These included areas such as medicines, staffing and care records. We saw that where areas for improvement had been identified, action plans were put in place to improve these areas. For example, there had been improvements made to the way calls and complaints were monitored.