

Pendeen Community Care Ltd Pendeen Community Care Limited

Inspection report

Unit 4, The Wilson Building Wilson Way Redruth TR15 3RU Date of inspection visit: 10 December 2018

Good

Date of publication: 21 January 2019

Tel: 01209313032

Ratings

Overall rating for this service

Is the service safe?GoodIs the service effective?GoodIs the service caring?GoodIs the service responsive?GoodIs the service well-led?Good

Summary of findings

Overall summary

About the service: Pendeen Community Care Ltd is a domiciliary care agency that provides personal care to people living in their own homes in the community. When we inspected they were providing the regulated activity, personal care, to 62 people in the Redruth and surrounding areas in Cornwall.

People's experience of using this service:

People were supported by staff that were caring, compassionate and treated them with the utmost dignity and respect. Any concerns or worries were listened and responded to and used as opportunities to improve.

People received person centred care and support based on their individual needs and preferences. Staff were aware of people's life history, and their communication needs. They used this information to develop positive, meaningful relationships with people.

People told us they felt well cared for by staff who treated them with respect and dignity and encouraged them to maintain relationships and keep their independence for as long as possible.

The provider ensured people had regular staff meaning people and staff were able to build positive relationships. People were supported by staff who had the skills and knowledge to meet their needs. Staff understood and felt confident in their role.

Staff liaised with other health care professionals to ensure people's safety and meet their health needs.

Where people lacked capacity, staff worked with the local authority to make sure they minimised any restrictions on people's freedom for their safety and wellbeing.

Staff spoke positively about working for the provider. They felt well supported and that they could talk to management at any time, feeling confident any concerns would be acted on promptly. They felt valued and happy in their work.

Audits were completed by staff, the registered manager and provider to check the quality and safety of the service.

The registered manager, director and human resources director team worked well to lead the staff team in their roles and ensure people received a good service.

More information is in Detailed Findings below

Rating at last inspection: Good. (Report published 15 June 2016)

Why we inspected: This was a planned comprehensive inspection based on the rating of Good at the last inspection. The service remained rated Good overall.

Follow up: We will continue to monitor intelligence we receive about the service until we return to visit as per our re-inspection programme. If any concerning information is received we may inspect sooner.

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 effective?	Good 🔍
The service was effective	
Details are in our Safe findings below.	
Is the service caring?	Good 🔍
The service was caring.	
Details are in our Safe findings below.	
Is the service responsive?	Good 🔍
The service was responsive.	
Details are in our Safe findings below.	
Is the service well-led?	Good 🔍
The service was well-led.	
Details are in our Safe findings below.	



Pendeen Community 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 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.

Inspection team: The inspection team consisted of an adult social care inspector and an expert by experience. An expert by experience is a person who has personal experience of using or caring for someone who uses this type of service.

Service and service type: Pendeen Community Care Ltd is a domiciliary care service. Staff deliver personal care support to people living in their own homes. Services are provided to both younger and older people who have learning or physical disabilities, who are living with dementia, have sensory impairments and or related mental health conditions.

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: We gave the service 24 hours' notice of the inspection visit because it is a domiciliary service and the manager is often out of the office supporting staff or providing care. We needed to be sure that they would be available to speak with us. We also needed to ensure that people's consent was gained for us to contact them for feedback about the service. We visited the office location on 10 December 2018 to speak with the registered manager and to review care records and policies and procedures.

What we did: We reviewed the records held on the service. This included previous inspection reports and notifications. Notifications are specific events that the provider is required to tell us by law. We reviewed the Provider Information Return (PIR) submitted by the registered manager. This told us what the service had

achieved and what they intend to develop in future. We require the provider to submit this annually and it provides us with information to plan our inspection.

During the inspection we spoke with staff, reviewed six staff recruitment and supervision files, six care records and records relating to health and safety, safeguarding and other aspects of the service. We spoke with eight care staff, manager of human resources, the registered manager and a director of the service. The expert by experience telephoned and spoke with ten people who use the service and one relative to gain their views of the service. We also received positive feedback from 3 health and social care professionals about their experience of the service.



Is the service safe?

Our findings

Safe- this means that people were protected from abuse and avoidable harm.

People were safe and protected from avoidable harm. Legal requirements were met.

Safeguarding systems and processes

• People were protected from potential abuse and avoidable harm by staff that had regular safeguarding training and knew about the different types of abuse.

- The provider had effective safeguarding systems in place and all staff had a good understanding of what to do to make sure people were protected from harm or abuse.
- People and their relatives explained to us how the staff maintained their safety. One person said, 'I feel very safe, it can be odd having someone in your home and I was worried at first but they are lovely.'

Assessing risk, safety monitoring and management

- Risks to people's safety and wellbeing were assessed and managed. Each person's care record included risk assessments considering risks associated with the person's environment, their care and treatment, medicines and any other factors. The risk assessments were detailed and included actions for staff to take to keep people safe and reduce the risks of harm.
- Staff understood where people required support to reduce the risk of avoidable harm.
- The registered manager checked all accident and incident records to make sure any action was effective, to identify any patterns or trends and to see if any changes could be made to prevent incidents happening again.

Staffing levels

- There were sufficient numbers of staff to meet people's needs. The provider ensured people had a consistent staff team.
- Each person's staffing needs were calculated based on a local authority individual needs assessment, which were reviewed and updated regularly as people's individual needs changed.
- People and their relatives told us they received care in a timely way.
- Staff had been recruited safely. All pre-employment checks had been carried out including reference checks from previous employers.

Using medicines safely

- Some people needed support or reminding to take their medicines. When staff supported people in this task appropriate medicines records were completed by staff.
- People told us they were happy with the support they received to take their medicines.
- Medicines were managed safely to ensure people received them safely and in accordance with their health needs and the prescriber's instructions. Staff were trained in medicines management and regular competency checks were carried to ensure safe practice.

Preventing and controlling infection

- Staff had completed infection control training and followed good infection control practices. They used protective clothing gloves and aprons during personal care to help prevent the spread of healthcare related infections.
- Everyone told us staff practiced good infection control measures.

Learning lessons when things go wrong

- Accidents and incidents were reported and monitored by the registered manager to identify any trends. The registered manager discussed accidents/incidents with staff as a learning opportunity.
- The management team recognised that due to the changing criteria about contacting paramedics, that they needed to improve their assessment skills in the area of moving and handling. In addition, they recognised that if a member of the team with a specific role was not available for some time then certain learning such as moving and handling training may reduce. Therefore, they shared out the learning and skills within the staff team so that they 'don't have all our eggs in one basket."

Is the service effective?

Our findings

Effective- this means that people's care, treatment and support achieved good outcomes and promoted a good quality of life, based on best available evidence.

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

- People's needs were assessed before the service began to provide support and people and their relatives confirmed this.
- Care was planned and delivered in line with people's individual assessments, which were reviewed regularly or when needs changed.

Staff skills, knowledge and experience

- People received effective care and treatment from competent, knowledgeable and skilled staff who had the relevant qualifications to meet their needs. The provider had a good system to monitor all staff had regular training and refresher training to keep them up to date with best practice. Training methods included online, face to face training and competency assessments. Staff felt well supported and had regular supervision and an annual appraisal to discuss their further development.
- New staff had completed a comprehensive induction.

Supporting people to eat and drink enough with choice in a balanced diet

- There were systems in place to enable staff to collect items of shopping for the people they supported. The procedures ensured that people's finances were protected when staff supported them in this area of their lives.
- People were supported by staff to maintain good nutrition and hydration.

Adapting service, design, decoration to meet people's needs

- The service had recently moved to a ground floor office space. This allowed visitors to be able to access the main office more easily.
- •The service enabled people to remain as independent as possible by ensuring they had the equipment they needed.

Supporting people to live healthier lives, access healthcare services and support

- •People visited their local surgery to see their GP and community nurse, and attended other health appointments regularly.
- •People were supported to improve their health. For example, staff supported a person with their physiotherapy exercises to assist them to develop their independence skills.

Ensuring consent to care and treatment in line with law and guidance

• People were supported by staff that knew the principles of The Mental Capacity Act 2005. Staff knew what

they needed to do to make sure decisions were made in people's best interests. Staff told us how people's relevant family members were involved and the registered manager provided examples of discussion held with other professionals where people did not have capacity to make complex decisions.

• People were asked for their consent before they received any care and treatment. For example, before assisting a people with personal care and getting dressed. Staff involved people in decisions about their care and acted in accordance with their wishes

Is the service caring?

Our findings

Caring – this means that the service involved people and treated them with compassion, kindness, dignity and respect

People were supported and treated with dignity and respect; and involved as partners in their care.

Ensuring people are well treated and supported

- People received care from staff who developed positive, caring and compassionate relationships with them.
- People told us staff knew their preferences and cared for them in the way they liked. Each person had their life history and individual preferences recorded which staff used to get to know people and to build positive relationships with them.
- Staff were kind and affectionate towards people and knew what mattered to them. People's comments included, "They always ask me if I need anything, are you alright, what can I do for you", "They remember if I've been poorly and always ask how I am today'" and "They are like family now, not just carers."
- People were always treated with kindness and were positive about the staff's caring attitude. People and their relatives were highly complementary in discussions with us about the care they received.

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

- People were involved in day to day decisions and in regular reviews of their care. Relatives confirmed staff involved them when people need help and support with decision making.
- Some people needed aids to help them communicate effectively. This was recognised and supported. Care plans recorded if people needed glasses or hearing aids.

Respecting and promoting people's privacy, dignity and independence

- Staff showed genuine concern for people and ensured people's rights were upheld.
- The provider recognised people's diversity, they had policies in place that highlighted the importance of treating everyone as individuals. People's diverse needs, such as their cultural or religious needs were reflected in their care planning.
- Staff and the registered manager were very aware that they were working in people's homes. They told us how they ensured people received the support they needed whilst maintaining their dignity and privacy. For example, making sure doors and curtains were closed; respecting when a person needed space.
- People's confidentiality was respected and people's care records were kept securely.

Is the service responsive?

Our findings

Responsive – this means that services met people's needs

People's needs were met through good organisation and delivery.

Personalised care

• Care plans were personalised to the individual and recorded details about each person's specific needs and how they liked to be supported.

- People were empowered to have as much control and independence as possible, including in developing care, support and treatment plans.
- People told us how the provider would respond to their changing needs. For example, one person told us 'I was coming out of respite care and phoned them up the night before, they altered all their rotas to accommodate me.'
- Daily notes were completed which gave an overview of the care people had received and captured any changes in people's health and well-being.

• There was information in place to enable the provider to meet the requirements of the Accessible Information Standard (AIS). This is a legal requirement to ensure people with a disability or sensory loss can access and understand information they are given. Each person's care plans included a section about their individual communication needs. For example, about any visual problems or hearing loss and instruction for staff about how to help people communicate effectively.

Improving care quality in response to complaints or concerns

- People knew how to provide feedback about their experiences of care and the service provided a range of accessible ways to do this.
- People and their families knew how to make complaints; and felt confident that these would be listened to and acted upon in an open and transparent way, as an opportunity to improve the service.

End of life care and support

• The registered manager informed us no one was receiving end of life care at the time of our inspection. The team would at times support people with end of life care and the service would work closely with other professionals to ensure people had dignified and pain free death.

Is the service well-led?

Our findings

Well-Led – this means that service leadership, management and governance assured high-quality, personcentred care; supported learning and innovation; and promoted an open, fair culture.

The service was consistently managed and well led. Leaders and the culture they created promoted high quality, person centred care.

Planning and promoting person-centred, high-quality care and support, and understands and acts on duty of candour responsibility.

• People, relatives and staff expressed confidence in the management team. The ethos of the service was to be open, transparent and honest. Staff were encouraged to raise any concerns in confidence through a whistleblowing policy. The registered manager, director and human resource director all worked five days a week, including weekends. They worked alongside staff and led by example.

- The registered manager, director and human resources director all spoke with us about individuals they supported and demonstrated a good understanding of people's needs, likes and preferences.
- Staff told us they had confidence in the management of the service and would not hesitate to report any concerns.

Managers and staff are clear about their roles, and understand quality performance, risks and regulatory requirements.

- The registered manager, director and human resources director were all very much involved in the day to day running of the service including working hands on, alongside staff where required. They positively encouraged feedback and were keen to grow their service whilst ensuring people received "the best care".
- People spoke highly of the service and could not identify any areas for improvement.
- Staff also strived to ensure care was delivered in the way people needed and wanted it.
- •There was a good communication maintained between the registered manager, director and staff.
- Staff felt respected, valued and supported and that they were fairly treated

Engaging and involving people using the service, the public and staff.

- People, relatives and advocates feedback was sought through a survey. Responses showed they were happy with people's care and quality of life.
- There was an open culture where staff were encouraged to make suggestions about how improvements could be made to the quality of care and support offered to people.
- Staff reported positively about working for the service and did not identify any areas for improvement. A staff member said, "I can't fault the company at all. It's a family run business and we are all treated equally. They support you, value you and we are looked after by them."

• People and staff were encouraged to air their views and concerns. The registered manager told us although they had not had any concerns they would ensure if they did these would be listened to and acted on to help improve and shape the service and culture. The registered manage, director and human resources director visited people regularly to seek their feedback.

•The service worked in partnership and collaboration with other key organisations to support care provision, joined-up care and service development.

Continuous learning and improving care.

• The director and registered manager were keen to ensure a culture of continuous learning and

improvement. They had started to explore other electronic systems to help them in the overall monitoring of their service quality and safety.

• The management team completed regular in-house audits of all aspects of the service.