

Passion Care Staffing Ltd

Passion Care Staffing Northampton

Inspection report

Unit S45, Moulton Park 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

This announced inspection took place on the 4, 5 and 7 May 2017. Passion Care Staffing Northampton provides a personal care service to people who live in their own homes in the community. At the time of our inspection the service was supporting 8 people.

There was a registered manager in post at the time of our inspection. A registered manager is a person who has registered with the Care Quality Commission 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 2008 and associated Regulations about how the service is run.

People received care from staff that were kind and caring and who would do that little extra to provide the care and support people wanted to enable them to stay in their own homes.

Staff had the skills and knowledge to provide the care and support people needed. They understood the need to protect people from harm and knew what action they should take if they had any concerns. People told us that they felt cared for safely in their own home.

People and their families had been involved in developing their individual care plans and staff understood their role in caring for people with limited or no capacity under the Mental Capacity Act 2005.

People felt respected and cared for in a dignified manner. Records contained detailed information to assist care workers to provide care and support in an individualised manner that respected each person's individual requirements and promoted treating people with dignity.

Staffing levels ensured that people received the support they required safely and at the times they needed. The recruitment practice protected people from being cared for by staff that were unsuitable to work in their home.

The registered manager was approachable and continually monitored the quality of the service provided. Staff and people were confident that issues would be addressed and that any concerns they had would be listened to.

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.

People told us that they felt safe in their home with the staff that cared for them and staff understood their responsibilities to ensure people were kept safe.

Risk assessments were in place and managed in a way which ensured people received safe support.

Safe recruitment practices were in place and staffing levels ensured that people's care and support needs were safely met.

There were systems in place to manage medicines in a safe way and people were supported to take their prescribed medicines.

Is the service effective?

Good ●

The service was effective.

People received personalised care and support. Staff were trained to ensure they had the skills and knowledge to support people appropriately and in the way that they preferred.

People were actively involved in decisions about their care and support needs. Staff demonstrated their understanding of the Mental Capacity Act, 2005 (MCA).

People were supported to access relevant health and social care professionals to ensure they received the care and support they needed.

Is the service caring?

Good ●

The service was caring.

People were cared for by staff that were kind and caring and committed to providing good care and support.

People were encouraged to make decisions about how their support was provided and their privacy and dignity was protected and promoted.

Staff had a good understanding of people's needs and preferences.

Is the service responsive?

Good ●

The service was responsive.

People were listened to, their views were acknowledged and acted upon and care and support was delivered in the way that people chose and preferred.

People using the service and their relatives knew how to raise a concern or make a complaint.

Is the service well-led?

Good ●

The service was well-led.

There was a registered manager who was committed to leading a service which supported people to live in their own home for as long as it was safe to do so.

There were effective systems in place to monitor the quality and safety of the service and actions completed in a timely manner.

Passion Care Staffing Northampton

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 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.

This announced inspection took place on 4, 5 and 8 May 2017 and was undertaken by one inspector. The provider was given 24 hours' notice because the location provides a domiciliary care service and we needed to be sure a member of staff would be available.

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.

Prior to the inspection, we checked the information we held about the service including statutory notifications. A notification is information about important events which the provider is required to send us by law.

We also contacted the health and social care commissioners who monitor the care and support of people living in their own home.

During the inspection we spoke with two people who used the service, a relative, and three members of staff which included a care assistant, a care team leader and a care co-ordinator plus the registered manager.

We reviewed the care records of three people who used the service and three staff recruitment files. We also reviewed records relating to the management and quality assurance of the service.

Is the service safe?

Our findings

People were supported by staff that knew how to recognise if people were at risk of harm and knew what action to take when people were at risk. People told us they felt safe with the staff that came into their home. One person said "The staff make me feel comfortable; I don't feel unsafe here." Staff told us that if they had any concerns they would report it straight away to the registered manager. Staff had confidence that the registered manager would take the appropriate action. We saw from staff records that all staff had received safeguarding training and that refresher training was planned. The staff were supported by an up to date safeguarding procedure.

Peoples' individual plans of care contained risk assessments to reduce and manage the risks to people's safety; for example people who had been assessed as at risk of falling had a risk assessment in place which gave details to the staff as to how to mitigate the risks of falling. There were also risk assessments in place for people who needed assistance in moving; there were clear instructions as to how many staff were needed to support people and what equipment was needed. The registered manager reviewed the care plans regularly and staff told us that if they had any concerns the registered manager would revise the plans and risk assessments.

There were appropriate recruitment practices in place to ensure people were safeguarded against the risk of being cared for by unsuitable staff. Staff had been checked for any criminal convictions and satisfactory employment references had been obtained before they started to work for Passion Care Staffing Northampton.

People told us that they felt there was a sufficient number of staff to meet their needs. People said that staff usually arrived on time and did not rush them. One person told us "I usually have the four same staff who understand me; they will always ring me if they are running late." A relative also confirmed that their relative usually had the same care staff each day who understood them. The registered manager explained that the staff rota was based around the needs of the people and the geographical area people lived in to take account of the travel time between calls. The agency only took on new people if they had sufficient resources available to meet the care and support required.

People's medicines were safely managed. Detailed care plans and risk assessments were in place when people needed staff support to manage their medicines. At the time of the inspection there were very few people who needed support with medicines. We observed medicine administration record sheets had been correctly completed. Staff told us that they were trained in the administration of medicines and the registered manager had tested their competency.

Is the service effective?

Our findings

People received care and support from staff that had the skills, knowledge and experience to carry out their roles and responsibilities effectively. People told us that they were confident in the staff and felt they were all well trained and understood their responsibilities. One person told us "The staff listen to me and understand what I need; I think they are all well trained."

The staff spoke very positively of the support and training they had been given. There was an induction programme in place which ensured that all new staff completed mandatory training which included manual handling, health and safety, safeguarding and medicine administration. New staff worked alongside the registered manager or one of the more experienced staff before they had worked alone. One member of staff told us "I was not confident at first after I had done my induction so the care co-ordinator spent more time with me to make sure I was happy before I went out alone."

Staff felt valued in their roles and told us that they had no hesitation to seek support from the registered manager. We saw from staff files that all staff received regular supervision and on-going support. The registered manager was planning a schedule for staff appraisals for when staff had completed 12 months with the agency. The registered manager and care co-ordinator was in contact with the staff on a regular basis and delivered some of the care each week. This gave the registered manager and care co-ordinator the opportunity to fully understand the needs of the people and enabled them to instruct the staff in various techniques to support people individually. It also enabled them to ensure the care plans in place were up to date and relevant and could respond quickly if changes to someone's care plan needed to be made.

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 Act 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. We checked whether the service was working within the principles of the MCA and we saw that they were. Staff sought the consent of the individual to complete everyday tasks; they were aware if a person had been deemed to lack the capacity to give their consent, the registered manager would ensure that appropriate steps were taken legally to identify someone to act in their best interests. At the time of our inspection the majority of people using the service were able to give their consent and were actively involved in their care plan.

People were supported with their meals and drinks when necessary. The care plan detailed what level of support a person may need with regards to eating or drinking. We saw from records that information was recorded as to what a person had eaten and that any concerns about a person's nutrition would be reported to the relevant health professional. A health professional told us that from their observation the staff were very responsive to people's needs and took the appropriate action when needed.

People's healthcare needs were carefully monitored. Records showed that people had access to a range of health professionals, including the District Nurse, GP and occupational therapist. One person told us "They

go above and beyond; when I was ill one day they stayed with me until the GP came and then the ambulance."

Is the service caring?

Our findings

People described the staff that supported them as kind, caring and pleasant. One person said "They are all brilliant; I have had a lot of care staff over the years and this lot are just brilliant. They always tell me what they are doing and ask me if I need anything else and they chat to me." A relative told us "We have five regular carers they are all good, some very good." A member of staff commented "All of us care and want to make sure that we support people in the way we would want our own family to be treated." This came across in the conversation we had with staff and their manner in which they spoke about the people they supported.

The staff ensured that people stayed in control of their lives by encouraging people to express their views and to make their own choices. People told us that staff always asked them what support they needed and how they liked things to be done. People told us that if the staff came in to help them at mealtimes they always chose what they were having. Staff responded to people's requests and ensured people were happy with the support they were offered.

People received their care in a dignified and respectful manner. Staff described how they protected people's dignity, they described closing curtains and doors to ensure no one could see in and covered people up as much as possible to maintain their dignity at all times. Staff understood the need to respect people's confidentiality and understood not to discuss issues in public or disclose information to people who did not need to know.

Care plans included people's preferences and choices about how they wanted their support to be given. People told us that staff took time to listen to them and respected their wishes. One person told us "We always have a good chat." Another person told us "We sometimes play Ludo." Staff spoke to us about being able to provide the continuity of care; they explained that they supported a regular set of people, which we confirmed when we spoke to people and looked at staff rotas. We could see from the way both the people and staff spoke that everyone looked upon each other as friends and were committed to providing the best care and support possible.

The majority of people receiving personal care were able to express their wishes and were involved with their care plans. We spoke to the registered manager about what support was available should a person not be able to represent themselves or had no family to help them. The manager explained that if that situation did arise they would support the person to get an advocate. At the time of the inspection no one had needed the support of an advocate.

Is the service responsive?

Our findings

People and their families initially met with the registered manager which gave everyone the opportunity to consider whether their needs could be met at the times they wanted. People were able to discuss their daily routines and their expectations of the service. This information was then used to develop a care plan for people. The registered manager ensured they had sufficient resources to meet people's needs before people were offered a service. This ensured that people's needs were consistently and effectively met.

The care plans detailed what people wanted and when they wanted support; these could be further strengthened by including information about people's past life and any hobbies and interests they may have or had. The plans were regularly reviewed and updated and we saw that if people needed to make changes this was accommodated. Daily records were kept and people confirmed with us that staff always read and completed the record to ensure everyone was kept up to date and informed of any changes. Staff told us that they would report any concerns or issues to the care co-ordinator or registered manager.

Staff were aware of people's cultural needs and explained if they were to support anyone who had different cultural needs that this would be detailed and explained in the care plans. One member of staff told us about a time when they supported someone whose first language was not English; the member of staff spoke the same language which enabled them to fully understand the needs of the person and help the rest of the staff understand. At the time of the inspection there was no one who had any specific cultural needs.

People and their families were given information about what to do if they had a complaint or needed to speak to someone about the service. The registered manager had ensured that there was always someone people could contact. People told us that they would speak to the registered manager or any of the staff if they had a complaint. One person told us "[Name of registered manager] came out to speak to me when I had an issue and they sorted things out; I have no complaints." A relative told us "[Name of registered manager] rang and apologised when something went wrong; he has been out a couple of times since to make sure everything is okay for [name of relative]." We saw that there were appropriate policies and procedures in place for complaints to be managed and responded to and action taken to address any shortfalls.

Is the service well-led?

Our findings

People benefited from receiving care from a team of staff who were able to provide consistent care they could rely upon. There was a registered manager who at times delivered the care and support to people which had enabled them to get to know the people and their families. The staff spoke positively about the support they received from the registered manager and felt listened to.

The provider routinely monitored the quality and safety of the service provided. As this was a small service they were able to address any issues as they arose and deal with them effectively. The provider was aware that as the service grew they would need to be proactive about the development of the quality assurance processes.

Regular 'spot checks' were undertaken which ensured that all staff were delivering the care required as detailed in the individual care plans. The daily records were monitored and any shortfalls in recording were addressed. Audits were undertaken such as audits of care plans and medicine administration.

There was an open and transparent culture within the service. People and their families were encouraged to give their feedback about the service. Surveys were sent out every six months. The feedback received had been positive about the service.

We saw that staff were encouraged to attend monthly staff meetings and had the opportunity to share ideas and best practice. One member of staff told us that the induction programme for new staff had changed following a discussion in a staff meeting. The programme now included more time for shadowing so that people felt confident and competent to work alone. New staff confirmed that they had been allowed to shadow as much as they needed to before they worked alone.

There were policies and procedures in place which covered all aspects relevant to operating a personal care service which included safeguarding and recruitment procedures. Staff had access to the policies and procedures whenever they were required and staff were expected to read and understand them as part of their role. Staff were able to demonstrate their understanding of their role and responsibility especially around whistleblowing and safeguarding.

Passion Care Staffing strived to provide a service which was tailor made to meet the individual needs of people and support them to live as independent a life as possible in their own surroundings. The registered manager was committed to providing well trained and motivated staff. The staff felt valued and were proud to work for the agency. One member of staff said "We care from the heart here."