

Priority Plus Limited

# Priority Plus Ltd

## Inspection report

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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 inspection was announced and took place on 23 March 2017. We gave the provider 48 hours' of our intention to undertake the inspection. This was because the service provides domiciliary care to people in their own homes and we needed to make sure someone would be available at the office.

There was a registered manager in place who is also the registered provider. 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. At the time of our inspection 37 people received care and support services.

People told us that they were relaxed and felt safe in their home when staff were with them. Staff were able to tell us of the needs of the people they provided care for and their roles and responsibilities in keeping people safe. Staff understood how to protect people from abuse and were clear about the steps they would need to take if they suspected someone was unsafe.

People had their individual risks assessed and had plans in place to manage them. People who had support with their medicines had them administered when needed and by staff who were trained and competent to do so.

Staff had been recruited following appropriate checks and the provider had arrangements in place to make sure that there were sufficient staff to provide support to people in their own homes. Staff said the training they received helped them do their job and gave them the right skills to meet the needs of the people they supported.

People told us they had developed good relationships with staff who they said were caring. Staff treated people with privacy and dignity. Staff respected people's homes and belongings and people were supported to maintain their independence. People told us they were happy with the way in which care staff supported them to choose and prepare meals.

People were involved in how their care and support was received. Staff understood they could only care for and support people who consented to being cared for. People told us they arranged their own healthcare appointments as required, however staff would help with telephone calls and reminders if needed.

People who used the service were able to raise concerns and the provider had a system to deal with any complaints. People said staff listened to them and they felt confident they could raise any issues should the need arise and that action would be taken.

People and their relatives were very complimentary about the service provided and said the agency was well managed. People and staff felt the management team were accessible and they could speak with them to

provide feedback about the service. The management team had kept their knowledge up to date through training and attending provider forums. The provider ensured regular checks were completed to monitor the quality of the care that people received and to action where improvements were needed.

## 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 received care and treatment from staff that understood how to keep them safe and free from the risk of potential abuse. People told us they felt there were enough staff to meet their care needs, provide support with medicines and manage risks.

### Is the service effective?

Good ●

The service was effective.

People received care in the way they wanted and from staff who were trained to support them. Staff had a good understanding of their responsibilities and sought people's consent before providing care.

### Is the service caring?

Good ●

The service was caring.

People and their relatives were happy that they received care that met their needs and they liked the staff who supported them. People's individual preferences were known and staff provided support which maintained people's dignity and respect.

### Is the service responsive?

Good ●

The service was responsive.

People were supported to make choices and be involved in planning their care. Care plans were in place that showed the care and support people needed.

People we spoke with told us they had not had reason to complain but were aware of how to raise concerns. Staff felt able to raise any complaints or concerns on behalf of people if required and they were assured that action would be taken.

### Is the service well-led?

Good ●

The service was well led.

People, their relatives and staff were very complimentary about the overall service and felt the management team were approachable and listened to their views.

The provider made regular checks to monitor the quality of the care that people received and look at where improvements may be needed.

# Priority Plus Ltd

## **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 inspection took place on 23 March 2017 and was announced. The inspection team consisted of one inspector and an expert by experience. An expert by experience is a person who has had personal experience of using or caring for someone who uses this type of care service. The provider was given 48 hours' notice because the location provided a domiciliary care service. The provider can often be out of the office supporting staff and we needed to ensure that someone would be in.

As part of the inspection we reviewed information we held about the service including statutory notifications that had been submitted. Statutory notifications include information about important events which the provider is required to send us by law. We also asked the local authority if they had any information to share with us about the service. The local authority is responsible for monitoring the quality and for funding some of the people receiving care support.

We spoke with seven people who used the service and three relatives. We also spoke with the registered manager, the deputy manager, the care co-ordinator and four members of care staff. We looked at the care records of four people to see how their care was planned. We also looked at three staff files, medication records, complaints and compliments, communication records, spot checks records and minutes of staff meetings.

## Is the service safe?

### Our findings

People who used the service told us they felt safe in their homes whenever staff visited. One person said, "[Member of staff] is always on time; I feel very safe with it all." Four people told us they felt safe as they had regular staff so they knew who to expect and the staff knew their care needs. One person said, "I've got a good regular carer, I know who's coming each time so that helps me feel safe." One relative we spoke with also commented, "We have had a year of full stability with the staff, we are very pleased." Two people told us they liked it that staff always called out when they arrived so they knew who was coming into their home. One person said, "I feel very safe; they shout out to let me know when they have arrived."

People we spoke with told us that the staff arrived at the expected time or they were contacted if they staff were running late. One person told us, "It's always the same one [member of staff]. They are always on time so I know when they are coming." Another person said, "[Member of staff] is always on time; [they are] very reliable." One relative commented, "When the weather is bad and they may be running later, the office ring and let us know."

Staff we spoke with confirmed that they had received training in safeguarding people and demonstrated a good understanding of the types of abuse people could be at risk from. Staff were clear about the steps they would take if they had any concerns. Staff told us they were confident to report any concerns with people's safety or welfare to their manager and that action would be taken. One member of staff told us they had raised a concern which had been dealt with immediately by the deputy manager. They told us they were advised of the actions taken and the situation was resolved.

People we spoke with told us staff supported them to remain safe in their home. One person said, "They help me in the bath in case I slip and help me get changed." Another person explained how staff supported them when they walked with a frame. They told us staff understood the support they needed and did not rush them. They said, "[Staff member's name] is very understanding and patient."

Staff we spoke with were aware how to provide safe care and used the care plans to ensure each person received care that met their needs, for example, how to use a hoist to safely move a person. Two members of staff also told us they checked areas were hazard free before they left people to help keep them safe. People's risks had been assessed when they first received care from the service and had then been reviewed and changes recorded. Staff told us the assessments gave them the correct level of information to provide care and support and records were kept up-to-date to ensure they were aware of any changes to people's care needs.

Staff told us that there were sufficient numbers of staff available to meet the needs of the people they provided a service to. One member of staff said, "There is enough staff to cover the calls. Staffing is stable and that means people get the same staff which is important." Staff told us that when staff were off work, either they or the management team would cover the calls.

The provider used a planning system to ensure staff were available to cover people's requested calls times.

We saw that where people had requested changes in times calls, these had been actioned. The system also recorded all care calls and alerted management team if a visit had not been made enabling them to take action to ensure people received the support they needed.

We saw records of employment checks for three staff completed by the provider to ensure staff were suitable to deliver care and support before they started work. The provider had made reference checks with previous employers and with the Disclosure and Barring Service (DBS). The DBS is a national service that keeps records of criminal convictions.

Some people told us they received support with their medicines. One person told us they got their medicine as required. They commented, "They [staff] give me my tablets and I take them. They record it all on a sheet; it's all done well." Another person told us they were supported with their medicines. They commented, "My carer gives me my medication every day."

Staff we spoke with told us they had received training in administering medicines and were observed by the management team to make sure they understood the training. One member of staff said, "They [management team] often do observation checks to make sure things are done correctly." Checks of the medicine record sheets were made by the management team to ensure staff had correctly recorded the medicines they had given to people. Action had been taken where records had not been completed as required. For example, staffing meetings had been held and staff discussed the required recordings.



## Is the service effective?

### Our findings

All people we spoke with told us staff knew how to support their needs. One person said, "Staff are very good. They are very professional in what they do." Relatives also confirmed they felt staff knew how to support people the way they chose. One relative said, "The staff know us very well. They are very qualified in what they do." A second relative commented, "They definitely know how to look after [family member's name]."

Staff we spoke with explained training helped them to do their job and were able to give an example of how training had impacted on the care they provided. For example, one member of staff explained training updating them on mobility equipment provided them with a greater confidence in their support to people. They told us, "It was nice to be updated. The training improved my confidence to know I was doing things right. We did it as a team so it was good we all learnt together."

Staff confirmed their induction training gave them the skills they need. One member of staff told us, "The induction prepared me for the role." They said they had shadowed different staff on a number of calls and were able to ask staff questions. They told us this gave them a good level of knowledge. They said, "I shadowed morning, afternoon and teatime calls, I got most of my confidence from the shadowing. I was glad to have someone with me."

All staff told us they received regular supervisions and attended staff meetings, which gave them the opportunity to discuss any issues or request further training. One member of staff told us, "The meetings are two way; if you want to talk about anything you can. It's good because you may be helping others in the team." In addition regular spot checks were made by the management team to observe their care practice. One member of staff told us they worked on their own for the majority of care they provided. They said, "What's good is they do regular spot checks but they also come and check or phone me to make sure things are OK."

The 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.

People can only be deprived of their liberty to receive care and treatment when this is in their best interests and legally authorised under the MCA. We checked whether the service was working within the principles of the MCA. Any applications to deprive someone of their liberty for this service must be made through the Court of Protection. We looked at the way the provider was meeting the requirements of MCA. The registered provider had not made any applications to the Court of Protection for approval to restrict the freedom of people who used the service. They were aware of this legislation and were happy to seek advice if they needed to.

Staff we spoke with told us they had completed MCA training and were aware of their responsibilities to

ensure people's consent to care was sought and recorded. This was confirmed by people and relatives we spoke with. One relative commented, "The carers [staff] ask consent before washing or bathing my [family member's name]. They ask, are you ready now? They are jolly and respectful."

Some people were being supported by staff to eat and drink enough to keep them well. People told us staff would give choices and ask what they would like to eat and made sure they had plenty to drink. One person said, "I choose it and they cook it." One member of staff said, "I always ask what would you like? I let them choose there and then because no one knows in advance what they want the next day do they?" Another person confirmed staff always prepared them a drink which they left to hand for later.

Staff told us how they supported people with specific dietary requirements. For example, leaving a snack available to people with diabetes or avoiding spicy foods for another person. The care co-ordinator told also gave examples of how people's cultural dietary requirements were supported by providing people with staff of the same ethnicity.

People told us staff would help them access medical help if they needed. One person said, "I make any appointments myself but I know staff would do it for me if I asked." Another person told us, "They [staff] are very good; when I was unwell they encouraged me to contact my doctor." Staff told us if they felt someone was unwell they would contact staff in the office; who then ensured contact with the GP was made in line with the person's consent.

## Is the service caring?

### Our findings

All of the people we spoke with told us they felt staff were very caring. One person said, "They [staff member] are marvellous. I couldn't cope without them. They are a god send to me. I couldn't wish for more." A second person commented, "I know [staff members name] well and I get on very well with them. They are lovely." Relatives we spoke with also told us, staff were caring. One relative said, "The carers are so caring with my [family member's name]. They are very gentle." Another relative told us, "Staff are wonderful and caring. I couldn't wish for better people."

We saw that the provider had received compliments from relatives of people receiving care. One relative had written in to compliment the care and say, "[Family member's name] likes [staff members' names]. They are prefect. I feel they are in very safe and caring hands and I am very pleased."

People told us that staff knew how to provide their care in the way they wanted it. One person said, "Its regular staff which helps because they know what I like and how I like things done." People and relatives also told us they had developed good relationships with staff. One relative told us, "[Family member's name] peeps out of the window when they [staff] are due to come. [Family member] so looks forward to them coming. We have a chat and a laugh. We have a great laugh every day."

Staff spoke in a caring way about the people they supported. One member of staff told us, "I've always been part of an extended family at home and it's like that here. I've got lovely people to care for." Another member of staff said, "It's such lovely people you work with, I really enjoy getting to know them." People and staff told us the provider looked to keep regular staff for people so they could build up positive relationships. One person said, "We have the same staff. We are very happy about that, we get on very well." One member of staff said, "The manager looks to provide the same carers, its good because you get to build up good relationships."

All of the people we asked told us staff were considerate and treated them with dignity and respect. One person told us, "Staff are very gentle with me." One relative also explained how staff knew the way their family member preferred to be support when receiving person al care. They told us, "They respect their privacy." People told us staff also respected their homes and belongings. One person told us, "They respect me and they keep things nice and tidy for me." Another person told us, "Staff are very thoughtful and always leave things nice and clean when making a tea or breakfast."

Staff told us how they respected people as individuals and how they involved people in their day to day care which promoted their independence. This was confirmed by one person we spoke with who told us, "My carer [staff] is very supportive and encourages me to be as independent as much as I can. They encourage me to go to my weekly club and have a sing along. We always have a chat about it." A relative also told us how the provider had arranged earlier calls so their family member could attend a weekly club. They said, "Staff come early on the days they attend the club to get them washed and ready to go. They are a great support and encourage [family member] to go; saying how good it is for them and its beneficial meeting other people." They went on to tell us their family member's health had improved since attending the club.

Staff we spoke with also shared their understanding of caring for someone with dignity. Staff described how they made sure that people were covered during personal care and that they ensured that curtains were closed, so that people's dignity and privacy was maintained.

## Is the service responsive?

### Our findings

All people we spoke with said they received the care they wanted. People told us they were happy with the service. They told us staff understood their needs and they felt comfortable to discuss or share their day to day tasks with them. One person told us, "Anything I want I just have to ask" Another person told us, "Carer [staff] is very good and always ready to help if I need anything."

We saw that people's cultural and diverse needs were discussed and considered as part of their initial assessment. At the time of our inspection carers told us they were providing support to people in respect of language. For example, one person received support from staff that could speak in their primary language and at the persons request were of the same ethnicity as the person. A review of their care showed the persons family had acknowledged this support and said it was easier for their family member to communicate and it had built their confidence.

Two people told us that they were involved in planning their care and any reviews. One person told us, "[Deputy manager's name] comes out and asks how things are." One relative also confirmed they had been involved in a review of their family members care. They said, "[Family member's name] care is reviewed often." We saw that people's comments and feedback were recorded in reviews and people signed their agreement.

Staff told us care plans included the most recent information for people and these would be updated to reflect any changes in a person's care. Staff said good communication systems were in place to advise them of any changes. One member of staff said, "Communication is good. I feel they update us well. I get the information I need."

People told us they felt listened to and that staff were supportive. One person told us, "When I had an appointment to attend, they responded and changed the time of my call, they were very good." One relative also told us, "They definitely listen to you and act upon it." They told us their family member had requested a change of staff. They said the deputy manager visited them and that, "They agreed the change; there was no problem. They were very understanding."

Four people we spoke with told us they had not had reason to complain but were aware of how to raise concerns. One person told us, "I'm happy with the way things are but I would happily call the office if I needed to." Staff also told us they felt able to raise any complaints or concerns on behalf of people if required and they were assured that action would be taken.

The provider was clear of the actions they would take if a complaint was received including logging the complaint, investigating, responding to the person and taking any learning for improvements

## Is the service well-led?

### Our findings

All people we spoke with were very positive about the service they received. One person told us, "I am very happy with the service. I have no complaints." Another person commented, "The service they give us is wonderful. I couldn't fault it" Relatives we spoke with were also said the service was well led. One relative said, "The service is run very well. It has been very good and [we've] no issues whatsoever." Another relative said, "We feel the service is very well led."

People told us that they knew the management team and they were approachable. One person said, "If I ever had a problem I would phone [Deputy manager's name], they are a very nice person." Another person said, "I can only say I think the manager is great. They came to the house to see me when I wanted to explain something. They are very good."

All staff we spoke with told us that the provider was accessible for advice and support. One member of staff said, "I definitely feel supported, if I've got any problems, they will always give me help and advice." Staff told us they felt able to tell management their views and opinions at staff meetings and they felt listened to. One member of staff said, "I have chance to air my opinions. Anything raised is always followed up."

A weekly meeting with the provider and management team was held to discuss any priority calls and any staffing information and issues. The care co-ordinator told us the information discussed and any areas identified for improvement was then jointly agreed and recorded in the form of an action plan. For example, a review of care plans with an action to include more information on any equipment used.

The provider told us they were pleased with how staff worked as a team to ensure that people received good care. The provider worked with the deputy manager and care co-ordinator to check and review the service provided. They completed number of monthly checks to assure themselves of the quality of care being delivered. For example we saw checks of medicine administration records and care notes that staff had completed when providing personal care, were reviewed monthly.

People and their relatives were asked for their feedback about the way the service was managed. The provider sent a questionnaire to all people using the service in June 2016 asking for their feedback and opinions on the care provided. A response was made by 10 people showed that they were happy with the care provided and communication. Feedback was sought in reviews and spot checks when people were asked about the service provided. One person said, "On occasions the supervisors turns up and watches what's going on. I'm very pleased with the company." People told us they had found an agency that suited their needs well. One person told us, "It's the best agency I've ever had. You couldn't get better " Another person commented, "I'd give them 10 out of 10, I wouldn't want to change [to another agency]".

The provider told us that they looked to continually develop and improve the service using information from reviews, management and staff meetings. They said they kept their knowledge up to date by attending training, for example, they had recently attended MCA and DoL training. They also accessed online guidance and attended local authority provider forums to improve their knowledge and discuss issues with

managers of other agencies.