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Professional Carers

Inspection report

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Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service caring?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

About the service

Professional Carers is a domiciliary care service providing care and support to people living in their own homes. At the time of our inspection the service was providing personal care to 277 people. The service supported 25 people who lived in their own home in a specialist Extra Care Housing called St Oswald's Court in Birkenhead.

People's experience of using this service and what we found

Professional Carers had an open and transparent culture resulting in an effectively organised, supportive and well-run service. The registered manager and nominated individual were clear about how the service should be provided and they led by example.

People's needs were comprehensively assessed before they started using the service, people and their relatives were fully involved in the assessment and care planning processes. Staff had established supportive relationships with people and knew them extremely well. Staff provided people with person centred care. Staff supported people to access healthcare professionals when required and supported people to manage their medicines safely.

The provider was driven in supporting their staff and provided access to resources to benefit the health and wellbeing of employees. Care workers spoke very highly about working for the service. People told us their care workers were caring and kind. Care workers had a good understanding of how to support people in a way that promoted their privacy, dignity and independence.

The provider had systems in place to protect people from the risk of abuse and people told us they felt safe. Risk assessments were completed to help identify and minimise risks people faced. Infection control measures were safe. Steps were taken to learn lessons when things went wrong.

The provider had addressed issues identified from the last inspection and internal quality assurance audits relating to medicine and care records were well embedded and used to drive improvements identified at the last inspection.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk

Rating at last inspection and update

The last rating for the service was Requires improvement (published on 29 January 2021).

The provider completed an action plan after the last inspection to show what they would do and by when to improve. At this inspection we found improvements had been made and the provider was no longer in breach of regulations.

Why we inspected

This inspection was prompted by a review of the information we held about this service.

For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating. The overall rating for the service has changed from requires improvement to good based on the findings of this inspection.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Professional Carers on our website at www.cqc.org.uk

Follow up

We will continue to monitor information we receive about the service, which will help inform when we next inspect.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

The service was safe.
Details are in our safe findings below.

Good ●

Is the service caring?

The service was caring.
Details are in our caring findings below

Good ●

Is the service well-led?

The service was well-led.
Details are in our well-led findings below.

Good ●

Professional Carers

Detailed findings

Background to this inspection

The inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 (the Act) as part of our regulatory functions. We checked whether the provider was meeting the legal requirements and regulations associated with the Act. We looked at the overall quality of the service and provided a rating for the service under the Health and Social Care Act 2008.

Inspection team

The inspection was carried out by one 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 care service

Service and service type

This service is a domiciliary care agency. It provides personal care to people living in their own houses, flats and specialist housing.

This service provides care and support to people living in specialist 'extra care' housing. Extra care housing is purpose-built or adapted single household accommodation in a shared site or building. The accommodation is bought or rented and is the occupant's own home. People's care and housing are provided under separate contractual agreements. CQC does not regulate premises used for extra care housing; this inspection looked at people's personal care service.

Registered Manager

This service is required to have a registered manager. A registered manager is a person who has registered with the Care Quality Commission to manage the service. 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.

At the time of our inspection there was a registered manager in post.

Notice of inspection

This inspection was unannounced.

What we did before the inspection

We reviewed all the information we held about the service. We also obtained information about the service from the local authority and local safeguarding teams. The provider was not asked to complete a Provider Information Return (PIR) prior to this inspection. A PIR is information providers send us to give some key information about the service, what the service does well and improvements they plan to make. We used all this information to plan our inspection.

During the inspection

We spoke with a total of 18 people and their relatives about their experience of the care provided. We spoke with 11 members of staff including the registered manager, operations director, nominated individual, care coordinators, trusted assessors and care staff.

We looked at a range of records. These included 10 people's records related to their care and support, medicines records, 6 staff recruitment records and records related to the auditing and monitoring of the service.

Is the service safe?

Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm.

At our last inspection we rated this key question requires improvement. At this inspection the rating has changed to good. This meant people were safe and protected from avoidable harm.

Using medicines safely

At the last inspection, the provider was found to be in breach of Regulation 12 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. This was because medicines were not always safely managed.

At this inspection, we found that improvements had been made and the provider was no longer in breach of regulation 12 in relation to medicines.

- Medicines management processes had improved since the last inspection and people's medicines were managed safely.
- Staff had access to current medication administration procedures and staff with responsibilities for administering medicines to people received the appropriate training and had their competency levels checked regularly.
- Medication policies and procedures were in place and staff followed them medication administration guidance, ensuring people received medication support in line with their care plan.

Assessing risk, safety monitoring and management

At the last inspection, the provider was found to be in breach of Regulation 12 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. This was because risks to people were not always safely assessed and mitigated to maintain people's safety.

At this inspection we found enough improvement had been made and the provider was no longer in breach of regulation 12 in relation to assessing risk.

- Safety monitoring and risk management measures had improved. Safety monitoring, assessment and management of risk was now well embedded and regularly reviewed.
- Risks to people were assessed and mitigated. There were risk assessments and guidance for staff on how to support people who were at risk of things such as developing pressure sores, pneumonia and the use of specialist medical equipment.
- When people's care and support needs changed, risks assessments were reviewed. For example, if someone's mobility declined an environmental risk assessment was completed to mitigate any falls risks within their home.
- Staff were knowledgeable people's care needs prior to visiting them. They knew what they should do if

there were any concerns about potential risks to people.

Staffing and recruitment

- There were enough staff to support people. People told us, "They seem to stick to the same carers as much as possible" and "I tend to have the same small group of carers. They do sometimes send someone new but it's rare."
- Staff were on time when visiting people. If any discrepancies alerted the management on the system staff used to check in and out of calls, these were investigated by a member of the management team to find out the reasons. One person said, "Sometimes they ring to tell me they are running late, if they are very late. I always know who is coming and I know them now."
- The provider had recruitment procedures in place that helped ensure new staff were suitable for the role and had been recruited safely using appropriate checks. The registered manager had a robust probationary process in place for new staff members.
- The registered manager and the management team was passionate and motivated to recruiting staff that would understand the values and vision of the service.

Systems and processes to safeguard people from the risk of abuse; Learning lessons when things go wrong

- The systems in place protected people from the risk of abuse.
- Staff received safeguarding training and had a good understanding of how to keep people safe from abuse. Staff told us they felt confident about raising concerns and that the registered manager and nominated individual would act on them promptly.
- Staff were aware of the providers whistleblowing policy and told us they would be confident in using it if they felt it necessary.
- The provider had robust accident, incidents and safeguarding procedures in place. Staff completed the relevant reports, investigations took place when necessary and lessons were learnt and shared with staff.

Preventing and controlling infection

- People told us staff wore appropriate PPE whilst providing their care and support. One person told us, "They are still wearing masks at my request which is good of them. They wear gloves and aprons too. They are very professional. It is all working well."
- People were supported to understand and follow current COVID-19 guidance including how to minimise the risk of spreading infections.
- People were provided with the necessary support to keep their home environments clean and hygienic.
- Staff had received PPE and infection prevention and control training (IPC), including refreshers, throughout the recent pandemic.

Is the service caring?

Our findings

Caring – this means we looked for evidence that the service involved people and treated them with compassion, kindness, dignity and respect.

At our last inspection we rated this key question outstanding. At this inspection the rating has changed to good. This meant people were supported and treated with dignity and respect; and involved as partners in their care.

Ensuring people are well treated and supported; respecting equality and diversity

- People told us staff were caring, friendly and always took time to speak with them and ask how they were. Staff had formed positive and caring relationships with people and knew them well. One relative told us, "The staff are lovely with [relative] and look after me too. They always ask how I am and if there is anything they can do before they leave. They always close the door when they are seeing to [relative] and keep her covered and they talk to her all the time." Another relative said, "They are kind, caring, wonderful people. They are always happy. I can hear them laughing with [relative], they obviously really know her. They take care of her and nothing is too much trouble. Everything is spotless. They have become like one of the family. It is a completely trusting relationship. I can't say enough positive comments about them."
- The provider aimed to ensure people received care from a consistent team of staff. Staff were knowledgeable about people's care and support needs and their preferences on how they were to be met.
- Staff spoke warmly about the people they supported and their families. They addressed people by their preferred names and knew what was important to them.

Respecting and promoting people's privacy, dignity and independence; Supporting people to express their views and be involved in making decisions about their care

- People and relatives told us staff always treated them with dignity and respect and provided care and support in a way that made them feel comfortable. One person said, "They make me comfortable and I trust them. They treat me nicely and always have a smile. They support me to do as much as I can for myself which is very important to me. I can't think of anything they could do better really. We have a good rapport and it works well." A relative said, "They are wonderful with [name], they treat him with such respect. In fact, they treat me and our home with respect too."
- People told us staff were respectful and encouraged them to maintain their independence. Staff encouraged people to maintain their hobbies and interests. One person told us, "They help me to maintain my independence. I look forward to them coming. They oblige if I ask them to do a bit extra or sometimes they offer. It's little things like taking bins out and such, it makes a difference."
- People and their relatives told us they had regular reviews with managers when they discussed, together people's care and support plans and agreed to any changes.
- The online care planning system used by the provider allowed people and their relatives to access their care and support plans. One person told us, "I have a care plan here and it is up to date. They know everything and I can see my notes if I use the link on the QR code. It's a good system."

Is the service well-led?

Our findings

Well-led – this means we looked for evidence that service leadership, management and governance assured high-quality, person-centred care; supported learning and innovation; and promoted an open, fair culture.

At our last inspection we rated this key question requires improvement. At this inspection the rating has changed to good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; Continuous learning and improving care

- Management understood their regulatory responsibilities and there were clear roles and responsibilities within the organisation.
- There were comprehensive quality assurance systems used to assess, monitor and improve the quality and safety of the service.
- The registered manager and operations director were committed to the continuous development of the service through effective use of the governance systems. Methods they used to measure quality and safety included regular reviews of people's care, satisfaction surveys, regular observations of staff practice and audits.
- We saw examples of how learning from incidents, audits and checks had been shared with the staff team in a positive manner with the aim of developing and improving the service provided. For example, when incidents occurred, lessons were learnt and actions implemented in a timely manner. One staff member said, "If something goes wrong, they will ask you to come in and they will support you and we talk everything through in a constructive way."
- Staff meetings took place regularly; staff told us they were able to share their views and that the management team's door was always open for any discussions. One staff member said, "I feel they are very professional and very approachable and never heard them raise voice and are really normal."

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people; Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- The service was consistently well-led. The culture was open, inclusive and people were empowered to comment on and make decisions about their care.
- People and their relatives spoke positively about the service. Feedback included, "I ring sometimes to cancel a call and there has never been a problem. Occasionally one of the girls [staff] will ring to check if everything is ok if I have cancelled. They are very caring" and "I feel very safe with them. We have a bit of banter even in the early hours. They know my likes and I trust them."
- The provider had created and developed a positive culture which put people at the heart of the service. One relative told us, "The office staff are lovely and will take on board anything. They rang last year to ask if they could take [relative] out to the 'Dementia Bus'. One of the seniors took her and she loved it, she met other ladies and their carers. I wasn't expecting them to do that sort of thing particularly as I didn't have to go with her. It really brightened her up."

- The provider respected all staff, and staff wellbeing and work life balance was considered paramount. The registered manager and operation directors spoke about measures that had been put in place to support staff including purchasing a number of cars for care staff to use for their work.
- Quality assurance questionnaires were circulated regularly to gather the views, opinions and suggestions in relation to the care being provided. We saw that feedback was reviewed and responses were provided. One relative told us, "They do ask us if all is going well sometimes. Also, I have turned up a couple of times and can see for myself all is fine. I went once and there was an assessor there working with one of the carers. So, they do check-up which I'm pleased about."
- Staff felt engaged and able to share their views of the service. Staff told us they could approach the registered manager, operations director or the provider with any views or suggestions to improve the service.

How the provider understands and acts on the duty of candour, which is their legal responsibility to be open and honest with people when something goes wrong

- The provider understood and acted on the duty of candour.
- Open and honest relationships had been developed with people and their relatives. They told us there were effective methods of communication in place.

Working in partnership with others

- The registered manager and provider worked in partnership with others to make sure people received the right care and support. This included working with health and social care professionals such as occupational therapists, GPs, district nurses and social workers where this was required for people.
- There was regular contact with people and relevant others to ensure consistency of care for people.