

Nightingales Homecare Ltd

# Nightingales Homecare

## 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

### About the service

Nightingales Homecare provides personal care and support to people living in their own homes. The service was supporting 38 people at the time of our inspection, 34 of whom received personal care.

Not everyone who used the service received personal care. CQC only inspects where people receive personal care. This is help with tasks related to personal hygiene and eating. Where they do, we also consider any wider social care provided.

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

People received a reliable service from staff who knew how to provide their care in a safe way. Risk assessments had been carried out to identify and minimise any risks involved in people's care. People's medicines were managed safely. Staff helped keep people's homes clean and wore personal protective equipment (PPE) when they carried out their visits.

Staff understood their responsibilities in protecting people from abuse and knew how to report any concerns they had. The registered manager had taken action to safeguard people when concerns had been raised about people's well-being. The provider's recruitment procedures helped ensure only suitable staff were employed.

Staff had an induction when they started work and had access to the training they needed to carry out their roles. Staff had opportunities to discuss their performance and development needs with the management team.

People's needs were assessed before they began to use the service. People told us their wishes and preferences about their care were listened to and incorporated into their care plans. Staff supported people to maintain good health and responded promptly if people became unwell.

People received their care from consistent staff and had established positive relationships with their care workers. People said staff knew their preferences about their care and respected their choices. Staff supported people to maintain their independence.

People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible and in their best interests; the policies and systems in the service supported this practice.

Relatives said the management team communicated well with them and kept them informed about their family members' wellbeing. People had opportunities to give feedback about the care they received and their views were listened to. People told us they would feel comfortable raising concerns if they were dissatisfied.

The management team maintained an effective oversight of quality and safety. Audits of key aspects of the service were completed and spot checks were carried out to observe the care staff provided. Staff were well-supported by the management team. Advice was available to staff when they needed it and team meetings took place to give staff any updates they needed about people's care.

For more details, please see the full report which is on the CQC website at [www.cqc.org.uk](http://www.cqc.org.uk)

#### Rating at last inspection

This service was registered with us on 11 October 2021 and this is the first inspection.

#### Why we inspected

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

#### 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 effective?

The service was effective.

Details are in our effective findings below.

Good ●

### Is the service caring?

The service was caring.

Details are in our caring findings below.

Good ●

### Is the service responsive?

The service was responsive.

Details are in our responsive findings below.

Good ●

### Is the service well-led?

The service was well-led.

Details are in our well-led findings below.

Good ●

# Nightingales Homecare

## Detailed findings

### Background to this inspection

#### The inspection

We carried out this performance review and assessment under Section 46 of the Health and Social Care Act 2008 (the Act). We checked whether the provider was meeting the legal requirements of the regulations associated with the Act and looked at the quality of the service to provide a rating.

#### Inspection team

One inspector carried out the inspection.

#### Service and service type

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

#### 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

We gave a short period notice of the inspection because we needed to be sure the provider or registered manager would be in the office to support the inspection.

Inspection activity started on 1 December 2022 and ended on 7 December 2022.

#### What we did before inspection

We reviewed information we had received about the service since its registration, including notifications of significant events. We used the information the provider sent us in the provider information return (PIR). This is information providers are required to send us annually with key information about their service, what they do well, and improvements they plan to make. We used all of this information to plan our inspection.

During the inspection

We spoke with the registered manager and the nominated individual about how the service was run. The nominated individual is responsible for supervising the management of the service on behalf of the provider.

We spoke with 7 people who used the service and 2 relatives to hear their feedback about the care the agency provided. We reviewed feedback forms received from 2 people who used the service and 2 relatives. We received feedback from 6 staff about the training, support and information they received.

We reviewed care records for 4 people, including their needs assessments, care plans and risk assessments, medicines audits for 2 people, recruitment records for 3 staff, records of training, supervision and spot checks, meeting minutes, satisfaction surveys, policies, quality audits, the complaints log and the business continuity plan.

# Is the service safe?

## Our findings

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

This is the first inspection for this newly registered service. This key question has been rated Good. This meant people were safe and protected from avoidable harm.

Assessing risk, safety monitoring and management; Learning lessons when things go wrong

- People told us they felt safe when staff provided their care. They said staff knew how to provide the care they needed in a safe way. One person told us, "I feel like I can trust them."
- Relatives confirmed staff provided their family members' care safely. One relative told us, "Their main priority is to make sure he is safe. They are with him all the time. They walk with him because he needs guiding. I can now go out 3 days a week for a couple of hours and know he is in safe hands." A relative who submitted a feedback form said, 'We are so thankful the care is in place as it gives us all peace of mind knowing through the day she is looked in at and safe.'
- Assessments were carried out to identify any risks to people in areas including eating and drinking, skin integrity and the environment in which care was to be provided. The assessments recorded the actions needed to reduce any risks identified.
- There were systems in place to ensure accidents and incidents were recorded and reviewed to identify learning and actions to prevent a similar event happening again. There was a business contingency plan for the service to ensure people's care would not be interrupted in the event of an emergency.

Staffing and recruitment

- The provider employed enough staff to meet the service's care commitments. The registered manager told us they would not take on new packages of care unless they were confident the agency had sufficient staffing resources to do so.
- People told us staff timekeeping was good and that they received a service they could rely on. They said the management team called them to let them know if their visits were delayed. One person told us, "They phone if they are going to be late, but they normally come around the same time. They are very reliable." Another person said, "[Registered manager] or [nominated individual] ring me and let me know when they are going to be late, but they are not often late. If they are, it is 10 or 15 minutes." A relative who submitted a feedback form commented, 'Their timekeeping has been great, which means a lot to her as [family member] is one for getting anxious when she has been told a time.'
- The provider's recruitment procedures helped ensure only suitable staff were employed. The provider requested references for staff prior to employment and obtained a Disclosure and Barring Service (DBS) certificate. DBS checks help employers make safer recruitment decisions and include a criminal record check.

Systems and processes to safeguard people from the risk of abuse

- Staff attended safeguarding training and understood their responsibilities in protecting people from abuse. Staff were clear about how to report any concerns they had. One member of staff told us, "If it happened, I would have to report immediately to my line manager, and to write a report giving as much

detail and information as possible." Another member of staff said, "I would report to the office or CQC, whichever is relevant and depending on circumstances."

- The registered manager had taken action to safeguard people when staff had raised concerns about people's well-being. For example, the registered manager had made a safeguarding referral to the local authority when concerned about a person who was at risk because they took too much of their prescribed medicines. As a result of the referral, the service began to manage the person's medicines with their consent.

#### Using medicines safely

- People who received support with medicines told us staff helped them manage this aspect of their care safely. Staff attended training before being authorised to administer medicines and their practice was assessed before they were signed off as competent. Medicines administration was also assessed during spot checks carried out by the management team.

- Staff recorded medicines administration on an app, which helped ensure safe medicines management as staff were unable to log out of a visit until they had completed all the scheduled tasks for each care call. The app also enabled the management team to maintain an oversight of medicines administration, as they had remote access to all the information staff recorded at each visit.

#### Preventing and controlling infection

- Staff received training in infection prevention and control (IPC) and people told us staff wore personal protective equipment (PPE) when they carried out their visits. One person said of staff, "They all wear their PPE; masks, gloves and aprons."

- People told us staff helped them keep their homes clean and hygienic. One person told us, "They always make sure everything is clean and tidy before they go."

# Is the service effective?

## Our findings

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

This is the first inspection for this newly registered service. This key question has been rated Good. This meant people's outcomes were consistently good, and people's feedback confirmed this.

Staff support: induction, training, skills and experience

- People were confident in the skills of the staff who supported them. One person told us, "They train the staff really well." A relative said, "They handle everything with confidence and I feel reassured that they know what they are doing."
- Staff had an induction when they started work, which included mandatory training and shadowing colleagues to understand how people preferred their care to be provided. Staff told us their induction had prepared them well for their roles. One member of staff said, "I had an induction and also did some shadowing with other team members until I felt comfortable to go out on my own." Another member of staff told us, "I had online training, some details about my first clients and I did a few days shadowing. This helped me know what I had to do."
- Staff had access to the training they needed to provide people's care. One member of staff told us, "I have had all the important training plus for a specific client with dysphagia we have received extra training online and a specialist nurse came to train us. We have done PEG feeding training, stoma bag managing and medication training."
- Staff had opportunities to meet with their managers to discuss their roles and any support they needed. One member of staff told us, "Every month I meet for supervision with my managers to answer a couple of questions about my knowledge and my skills, to understand what I do, if I have done my job well, and to communicate my concerns if I have any." Another member of staff said, "I have had supervision. It was to make sure I was okay in myself and my well-being, if there were any issues around clients, or if I wanted to further my qualifications and steps I could take."

Assessing people's needs and choices; delivering care in line with standards, guidance and the law

- People's needs were assessed before they used the service to ensure staff had the skills and training they needed to provide their care. Assessments considered areas including healthcare, mobility, continence, and personal care.
- People told us they had been asked about their preferences about their care during their assessments and that their views had been listened to. One person said, "[Registered manager] came round to see me; her and [nominated individual]. They did an assessment. They talked to me for a long time. They asked a lot of questions. It was very thorough." Another person told us, "They did an assessment. They asked me what I wanted."
- Relatives confirmed their family members' needs had been assessed, and that assessments included identifying which elements of care their family members could manage themselves. One relative told us, "They came round and they assessed what [family member's] needs were. They wanted to check what she could do for herself."

Supporting people to live healthier lives, access healthcare services and support; Staff working with other agencies to provide consistent, effective, timely care

- People told us staff supported them to maintain their health. One person said, "They take me to see the doctor if I need. They collect my prescription. [Care worker] takes me for blood tests and the flu' jab."

Relatives told us staff monitored their family members' health and communicated any changes to them. One relative said, "They keep [family member] really well. They get in touch if there are any problems so I can contact the doctor."

- People told us staff had taken prompt action if they became unwell. One person said, "[Nominated individual] came to see me one morning and asked if I was all right. I said I have a pain on my left hand side. She asked me to sit down and immediately called an ambulance. She waited until the ambulance came and popped in and out to check on me." A relative said, "[Family member] had a fall and the carer wouldn't leave even though I turned up and the ambulance. She even came back in her own time to check on [family member's wife]."

Supporting people to eat and drink enough to maintain a balanced diet

- People who received support with meals told us they were happy with this aspect of their care. They said staff supported them to choose the meals they wanted.

- People told us staff encouraged them to eat and drink enough to stay healthy. One person told us, "They make sure I am hydrated." A relative who submitted feedback via our website said, 'They make sure they're eating properly and encourage them to eat.'

- People's nutrition and hydration needs were discussed at their initial assessments. Any needs were identified in these areas were recorded in people's care plans.

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

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.

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.

When people receive care and treatment in their own homes an application must be made to the Court of Protection for them to authorise people to be deprived of their liberty.

We checked whether the service was working within the principles of the MCA.

- People were asked to sign their consent to their care before they began to use the service.

- Staff understood how the principles of the MCA applied in their work. People told us staff asked for their consent before giving care on a day-to-day basis. One person said, "They ask before they do anything." Another person told us that, before providing their care, "[Staff] always check I'm happy." Relative confirmed staff asked for consent before providing their family members' care. One relative told us, "I have them on a video so I see them ask for consent."

- None of the people using the service were subject to deprivations of their liberty. The registered manager said they would seek support from the local authority in carrying out mental capacity assessments if necessary.

# 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.

This is the first inspection for this newly registered service. This key question has been rated 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 the staff who visited them were kind, caring and helpful. One person said of staff, "They have all been very nice but [regular care worker] is lovely. She does everything I ask of her." Another person told us, "They are very good, they have all been very helpful."
- Relatives confirmed staff were kind and praised their calm and professional approach. One relative told us, "I think they do a fantastic job; they are nice and calm. They are just really lovely people; they have a good team there." A relative who submitted a feedback form said of staff, 'They are lovely and professional.'
- People told us they got on well with their care workers and enjoyed their company. Relatives said their family members had established positive relationships with the staff who visited them. One relative told us, "[Family member] has really taken to the ladies they send. He recognises them and smiles. They bring the best out in him."
- People told us they saw the same care workers regularly. They said the registered manager understood this was important as it meant staff understood their needs and preferences. One person told us, "I like to know who is coming. [Registered manager] is very keen that I always see a familiar face."
- Relatives confirmed their family members received their care from consistent staff. One relative told us, "[Family member] gets the same carers all the time. She doesn't have to worry who is coming and who isn't." A relative who submitted a feedback form commented, '[Family member] is being cared for extremely well by this agency. She loves that she has just a few ladies calling to assist her with her needs, as continuity is very important to her and us.'

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

- People told us staff listened to and respected their views about their care. One person said, "I know [care worker] will do it the way I want it done." Another person told us, "They know my routine." People said staff maintained their privacy and dignity when providing their care. One person told us, "They respect my privacy. They don't come in when I am using the bathroom."
- People receiving care and their relatives told us staff stayed for the scheduled length of their visits and did not rush people when providing their care. One person said of staff, "They never seem in a rush." A relative who submitted a feedback form commented, 'They are all patient with [family member] as she needs to be given time with washing and dressing, as her mobility is quite slow.'
- People said staff took the time to talk to them as well as providing their care when they visited. One person told us, "[Care worker] gives me a lot of attention. Yesterday she spent a long time talking to me before she went." A relative who submitted a feedback form commented, 'They always ask if [family member] needs anything else done before they leave, which she loves, as this makes her feel special and

cared about.'

- People told us staff encouraged them to stay as independent as possible. One person said, "They help me to be as independent as I can." One person had commented in a survey returned in November 2022, 'The care service helps me to stay independent.'
- Relatives confirmed staff supported their family members in a way which promoted their independence. One relative said, "[Family member] can do a lot herself; she makes herself a drink and a sandwich. They make sure they don't take over." Another relative told us, "There are certain things [family member] likes to do for himself, which they know about."

# Is the service responsive?

## Our findings

Responsive – this means we looked for evidence that the service met people's needs.

This is the first inspection for this newly registered service. This key question has been rated Good. This meant people's needs were met through good organisation and delivery.

Planning personalised care to ensure people have choice and control and to meet their needs and preferences

- Each person had a personalised care plan which was developed from their initial assessment. Care plans were available to staff via an app on their phones. This system enabled the management team to update people's care plans straight away if their needs changed. Staff also used the app to record the care they had provided at each visit.
- People confirmed they were involved in planning their care. They said the registered manager had taken time to listen to their wishes and their preferences about which staff they wanted to support them. One person told us, "[Registered manager] asked me which one I want sent to me." Another person said, "They give me the person I like. When they go on holiday, they send someone else but it's someone I trust and that I have met before."
- People said the service was flexible to meet their needs. One person told us, "They are really flexible." Another person said of the care they received, "They tailor it to what I need." Relatives told us staff adapted the support they provided based on their family members' wishes. One relative said, "They are willing to go that extra mile for [family member]. If she changes her mind, they are adaptable."
- People told us staff were happy to carry out additional tasks that were not included on their care plans. One person said, "They do things they don't have to do; they strip the bed and they put the rubbish out for me." One person commented in a survey in November 2022, 'They are all very pleasant and will do odd jobs if needed.' A relative told us, "If [family member] has a sleep after lunch, they will Hoover, they will change the sheets if necessary, wipe the bath round. They are very willing. They like to be occupied."
- Staff told us they received enough information about people's needs before they began to support them. One member of staff said, "Before we start with a new client, we get information through their care plan. All their needs are detailed step by step." Another member of staff told us, "We receive details about our service users every time; their health conditions, medical information, when they change their medication, their daily routine, or any other information which helps us to support them well."

Meeting people's communication needs

Since 2016 onwards all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard (AIS). The standard was introduced to make sure people are given information in a way they can understand. The standard applies to all people with a disability, impairment or sensory loss and in some circumstances to their carers.

- People's individual communication needs were discussed and recorded during their initial assessment. Any needs identified were then documented in people's care plans.
- People told us their care workers understood their individual communication needs and took the time to listen to what they had to say. One person said, "My English isn't very good, and I worry they won't

understand me, but they spend time to understand me." A relative told us their family member had difficulties with speech but that staff took time to ensure they understood their family member's wishes.

#### End of life care and support

- People were given the opportunity to express their wishes about end of life care during their initial assessments. The service was not supporting anyone with end of life care at the time of our inspection. The registered manager told us they would access support from specialist healthcare professionals if anyone developed end of life care needs.

#### Improving care quality in response to complaints or concerns

- People and relatives told us they knew how to complain and said they would feel comfortable raising concerns if necessary. One person told us, "If I have got any complaints, I can talk to them." A relative said, "I would have no qualms about speaking up if we were not happy about something."
- The service had a complaints procedure which set out how any complaints received would be managed. The service had received one formal complaint in January 2022. We saw evidence the complaint had been managed in line with the complaints procedure and resolved. The registered manager had taken action to address the issues highlighted in the complaint and issued an apology where shortfalls were identified.

# 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.

This is the first inspection for this newly registered service. This key question has been rated Good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

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

- People told us communication from the management team was good. Relatives said the management team kept them informed about any issues affecting their family members and were responsive to any requests they made. One relative told us, "I have a good rapport with management; they are really nice. They are very cheerful and helpful on the phone." Another relative said, "They are always on the other end of the phone. If I need to change something, they are always very helpful."
- People said the registered manager visited them and asked for their feedback about their care. One person told us, "[Registered manager] comes out because she likes to see the clients. She always asks if we are happy with things." Another person said, "The lady in charge is one of those people who doesn't sit in the office; she actually came out to see us."
- People had also been invited to give their views through surveys. The surveys returned in November 2022 contained positive feedback about the care staff provided. For example, one person commented, 'Happy to have a service I can rely on', and, 'All the girls are lovely.'
- Where people had requested improvements, these had been responded to. For example, one person said they had not been informed when their regular care worker was off work and a different care worker visited them. The registered manager told us they now made sure people were always advised which member of staff would be visiting them.
- Staff told us they received good support from the management team. They said the management team was available for support and advice when they needed it. One member of staff told us, "Management are friendly and very welcoming, constantly checking in to make sure we are okay." Another member of staff said, "They are always happy to listen and are very flexible when needed. So far excellent, really caring and helpful."
- Staff said they were able to speak up about any concerns or suggestions they had and said the management team were responsive to their feedback. One member of staff told us, "The managers take our suggestions and concerns very seriously, they will discuss and figure out what will be best options for us and our clients and always appreciate us and what suggestions and concerns we have raised." Another member of staff said, "If I felt a service user needed something to support them, I would speak to management and they would follow up and contact the family."

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

- Relatives told us the management team maintained a good oversight of the service. Some relatives said the management team had helped them obtain professional input for their family members, which had improved the care they received. For example, one relative told us the management team had helped them in liaising with the local authority and an occupational therapist to obtain a bed more suitable for their family member's needs. Another relative said, "They are really on the ball when things need doing."
- Relatives told us staff always recorded notes of the care they provided at each visit. Some relatives said they accessed information via the app used by staff, which they found helpful in keeping up to date with their family member's care. One relative told us, "They do a report before they leave about how they have found [family member], what he has had to eat, and that he has taken his medication." Another relative said, "The carers have to report every time they see anyone. I can see the daily logs on the app, which I find very useful."
- There were systems in place to monitor quality and safety, including audits of key areas of the service. The management team carried out spot checks to observe the care staff provided. This included how staff communicated with people and whether staff supported people in a way that promoted independence. A member of staff told us, "Spot checks are used for being able to see first-hand how the staff are with the clients and that they know how to use equipment if needed in the correct way."
- The registered manager understood their responsibilities under the duty of candour and the requirement to act in an open and transparent way when concerns were raised. When necessary, notifications of significant events had been submitted to CQC and the local authority.

Continuous learning and improving care; Working in partnership with others

- Team meetings were held to ensure staff provided people's care in a consistent way and to discuss any changes in people's needs. Staff told us team meetings provided useful updates and provided opportunities to raise any concerns they had. One member of staff said, "Staff meetings are used to discuss clients and their needs, and to bring up any concerns that the staff may have." Another member of staff told us, "They are used to update us about any changes to clients' needs and anything else we need to know."
- The service had effective working relationships with other agencies and professionals involved in people's care, including healthcare professionals and the local authority which commissioned care.