

Amazing Friends UK Limited

Percurra

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: Percurra provides personal care and support to people who require assistance in their own home. 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: Relatives told us they were very happy with the service being provided.

Care and treatment was planned and delivered in a way that was intended to ensure people's safety and welfare. People were cared for and supported by staff who had received the appropriate training. Staff were employed following the appropriate recruitment checks.

There were systems in place to minimise the risk of infection and to learn lessons from accidents and incidents. There were safe medication procedures for staff to follow.

Staff had a good understanding of people's preferences of care, staff promoted people's independence. People and their relatives were involved in the planning and review of their care. Care plans were reviewed on a regular basis. People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible; the policies and systems in the service support this practice.

Where needed, staff supported people with their nutritional requirements.

People were supported to follow their interests and participate in social activities. The registered manager had policies in place to respond to complaints. Support could be provided to people at the end of their life.

The provider had systems in place to monitor and provide good care and these were reviewed on a regular basis.

This service was registered with us on 10/03/2017 and this is the first inspection.

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

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 ●

Percurra

Detailed findings

Background to this inspection

The 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.

Inspection Team:

The inspection was carried out by one inspector.

Service and service type:

Percura is a domiciliary care agency. It provides personal care and support to people in their own home. At the time of our inspection they were providing approximately 60 care hours per week.

The service had a manager registered with the Care Quality Commission. This means that they and the provider are legally responsible for how the service is run and for the quality and safety of the care provided.

Notice of inspection:

We gave the service 48 hours' notice of the inspection. This was because it is a small service and we needed to be sure that the provider or registered manager would be in the office to support the inspection. Inspection activity started on 2 September 2019 and ended on 3 September 2019. We visited the office location on 2 September 2019.

What we did:

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. We reviewed previous reports and notifications that are held on the CQC database. Notifications are important events that the service must let the CQC know about by law. We also reviewed safeguarding alerts and information received from a local authority.

During our inspection we spoke with one person and one relative. We spoke with the registered manager

and a care worker. We reviewed three care files, two staff files and records held in relation to the running 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.

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.

Systems and processes to safeguard people from the risk of abuse

- People told us they felt safe using the service. One person said, "I feel safe with them and they make sure everything is secure when they go."
- The registered manager had policies in place for safeguarding and 'whistle blowing' and knew how to raise concerns with the local safeguarding authority.
- Staff had received training in safeguarding and knew how to escalate any concerns.

Assessing risk, safety monitoring and management

- There were systems in place to identify any potential risks to people.
- Risk assessments were person centred to match their needs. For example, to assist people's mobility, medication needs and to safely support their personal care and nutrition requirements.
- A full assessment was completed of the environment where people received care to ensure it was safe for them and staff. All equipment used by people was fully risk assessed.
- The registered manager had policies in place for staff to follow in such events as adverse weather conditions, and reporting systems if staff were unable to attend for work so that cover could be provided.

Staffing and recruitment

- People were supported by regular staff who stayed for the allotted time. The registered manager recruited more staff in line with the service expanding to accept more care packages.
- Checks were undertaken on staff before they commenced employment at the service, which included references and disclosure and barring checks. This helped ensure that only people of a suitable character were employed.

Using medicines safely

- There were clear care plans and risk assessments in place to guide staff in how to best support people with their medication.
- There were systems in place to support people with medication and staff had received training on this, no-one currently needed medication support and people were responsible for managing their own medications.

Preventing and controlling infection

- Staff had received training in infection control and were provided with the appropriate personal protection equipment.

Learning lessons when things go wrong

- The registered manager had systems in place to monitor incidents and accidents and to identify any learning points.

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.

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

- Peoples needs were assessed prior to care commencing and regularly reviewed. Peoples protected characteristics under the Equalities Act 2010 were identified and supported.
- The registered manager kept themselves up to date with best practice guidance.

Staff support: induction, training, skills and experience

- The registered manager had achieved teaching qualifications so that they could personally deliver training to staff. They also used a number of training resources such as workbooks and social care television training programs.
- New staff were provided with a full induction and support. The registered manager told us staff new to care would complete the care certificate to ensure they had the knowledge and skills to provide care and support to people.
- From records we saw the registered manager completed spot checks on staff as an opportunity to review their practice and to give them support. The registered manager told us they would be completing yearly appraisals for staff.

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

- Nutritional information was obtained for people being supported, to identify their food and drinks likes and dislikes.
- Where people required special diets or assistance, this had been identified, and staff had been trained in how to support people.
- One person said, "Staff help to make food and sit down and have a cup of tea with us."

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

- Staff supported people to access other healthcare services when required. One member of staff said, "I assist my client on health appointments and support them with treatment programs."
- The registered manager told us they were happy to work with other healthcare professionals and kept their contact numbers should they need to speak with them. For example, recorded in notes were telephone contacts for social workers, physiotherapists, occupational therapist and GPs.

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.

- The registered manager worked within the principles of the MCA. Staff knew how to support people to make choices and these were clearly identified in care plans.
- People's consent was clearly documented and where some people had lasting powers of attorney in place, copies of these were kept on file by the registered manager.

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 and relatives were complimentary of the support they received from staff. One person said, "They are very good." A relative told us, "We are very happy with the care, everything is all really good."
- People were consistently supported by the same care team.
- Equality and diversity needs were assessed during the assessment process and recorded in care plans.

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

- The registered manager completed a full assessment with people, relatives and other healthcare professionals. During this assessment the registered manager recorded people's views and preferences for care.
- Care packages were regularly reviewed with people and relatives to ensure they were still meeting their needs and requirements.

Respecting and promoting people's privacy, dignity and independence

- Care plans identified what was important to people and how staff could support them to maintain their independence. One member of staff said, "We have goals that we are working towards which is important to them."
- People were supported to make choices about the kind of support they wished to receive and who they wanted to deliver this support.

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

- An assessment of people's care needs was undertaken, and care packages planned with people's full involvement. For example, the registered manager introduced new staff to people to gain their opinion and see if they wished to be supported by them.
- When care plans were agreed, the frequency of reviews were set with people's involvement. We saw reviews were initially set monthly or two monthly moving to six monthly when people agreed.
- Care plans were kept up to date and available to staff to see. Daily records were maintained which outlined the care provided on each visit in detail.

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.

- The registered manager provided information in a format that was suitable for people for example large print.
- People's communication needs were assessed, and this was recorded in care plans so that staff knew the preferred way to communicate with people.

Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities that are socially and culturally relevant to them

- Staff supported people to follow their own interests and activities and at times acted as companions for people. For example, one member of staff told us how they supported a person to go away on short breaks and have holidays. Another member of staff told us how the person they supported liked them to sit and watch television quizzes with them.

Improving care quality in response to complaints or concerns

- There were systems in place to investigate concerns or complaints. People and their relatives knew how to raise concerns and expressed confidence that they would be dealt with. There had not been any complaints raised.

End of life care and support

- There was no end of life care currently being provided. The registered manager said they had training in end of life care and were confident they could liaise with the appropriate healthcare professionals and

support this need.

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; 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 registered manager and provider both delivered care and support to people. They were experienced and knowledgeable and committed to providing high quality care for people.
- Care planning documentation was person centred and aimed at supporting people to make choices about their own care needs and goals for care.
- Staff shared the manager's vision to be a caring company and to support people how they wished to be supported.
- The registered manager understood the duty of candour and their duty to be open and honest about any incident which caused or placed people at risk of harm

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

- There was a positive management structure in place, which was open and transparent. One member of staff said, "The registered manager is always available if I need to talk to them, or they get back to me straight away if I message them."
- The management team had oversight of what was happening in the service, on a day to day basis.
- The registered manager had systems and processes in place to monitor and audit the service to ensure continual improvements were made.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- The provider had a number of ways of engaging with people who used the service. There were regular reviews of care packages.
- The registered manager gained people's feedback during face to face meetings, via e-mails and telephone calls. In addition, they invited people and relatives to complete independent surveys.

Continuous learning and improving care; Working in partnership with others

- The registered manager kept themselves up to date with developments in the industry through networks they belonged too and organisations such as dementia action alliance.
- The registered manager received support and guidance from an external management company to ensure they were working within the regulations. As part of this they completed regular audits of the service

and provided management support.