

Firstpoint Homecare Limited

Firstpoint Homecare Darlington

Inspection report

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23 November 2023

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Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

About the service

Firstpoint Homecare Darlington is a domiciliary care agency. It provides personal care to predominantly older people living in their own houses and flats in and around the Darlington and Northallerton area. At the time of this inspection, 47 people were using the service.

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. At the time of this inspection, 38 people who were using the service were in receipt of personal care.

People's experience of the service and what we found:

People spoke highly of the staff team and the quality of care they provided. People felt safe and were confident in raising any concerns. Staff had access to the relevant personal protective equipment (PPE) and people told us this was appropriately used during care visits.

Safe recruitment processes were in place and followed. People were supported by a consistent team of staff. People were aware of which care staff were due to come to their visits and the expected time.

Medicines were managed safely. Staff had received appropriate training and had their competencies assessed to ensure they were following best practice guidance. Records in relation to topical medicines, such as creams, did not always clearly state where the medicine was to be applied. We have made a recommendation about this.

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.

The registered manager had effective oversight of the service. Quality assurance processes were in place and used to monitor and improve the quality of care. People told us they were asked to provide feedback and felt their preferences and views were listened to. Staff spoke highly of the registered manager and their support and commitment to the service.

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

Rating at last inspection

The last rating for this service was Good (published 1 August 2018)

Why we inspected

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

We undertook a focused inspection to review the key questions of safe and well-led only. For those key question not inspected, we used the ratings awarded at the last inspection to calculate the overall rating.

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

Recommendations

We have made a recommendation about the recording of medicines.

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?

Good ●

The service was safe.

Details are in our safe findings below.

Is the service well-led?

Good ●

The service was well-led.

Details are in our well-led findings below.

Firstpoint Homecare Darlington

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 team consisted of 1 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.

The Expert by Experience made telephone calls to people who use the service and their relatives following the office site visit.

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 provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations.

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

Notice of inspection

The inspection was announced. We gave the service 48 hours' notice of the inspection. This was because the service provides care and support in people's own homes. We needed to be sure that the provider or registered manager would be in the office to support the inspection.

Inspection activity started on 22 November 2023 and ended on 24 November 2023. We visited the office location on 22 November 2023.

What we did before the inspection

We looked at information we held about the service such as notifications we had received from the registered manager. A notification is information about important events which the service is required to send us by law. We sought feedback from the local authority contract monitoring team prior to our visit. 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 this information to plan our inspection.

During the inspection

During the inspection site visit we looked at a range of documents and records related to people's care and the management of the service. We viewed 6 people's care and medication records, 2 staff recruitment files and a selection of records used to monitor the quality and safety of the service.

We had discussions with the registered manager and operations director who was also the nominated individual. The nominated individual is responsible for supervising the management of the service.

After the inspection site visit, we contacted 9 people who used the service and 5 relatives to ask their views on the service provided. We also contacted 6 members of staff.

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 Good. At this inspection the rating has remained Good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse and avoidable harm

- People were safeguarded from abuse and avoidable harm.
- Staff had received safeguarding training and understood the process to follow if they suspected abuse.
- People told us they felt safe with the care and support provided by Firstpoint Homecare Darlington. Comments included, "I couldn't manage without them (staff). They are so kind, lovely. They support me so much", "The carers I get are lovely – first class! I feel safe with them" and "Staff are very kind and trustworthy and I feel safe with them."

Assessing risk, safety monitoring and management

- The provider assessed risks to ensure people were safe. Staff took action to mitigate any identified risks.
- Risk assessments were in place to guide staff on how to safely meet people's care and support needs.
- Risk assessments had been regularly reviewed to ensure they remained relevant and corresponded with people's current support needs.
- Accidents and incidents were recorded. Learning was shared with the staff team when things had gone wrong.

Staffing and recruitment

- Safe recruitment processes were in place and followed.
- All appropriate pre-employment checks had been completed prior to new staff commencing employment. Some gaps in employment history had not been fully explored. We discussed this with the registered manager who took action to address this.
- There was enough staff to support people with their care and support needs. People were supported by a consistent team of staff who arrived at the allocated times. Comments included, "I never feel rushed with them (staff)", "I always get my calls so presume they have enough staff" and "I get a rota so I know who is coming. It sometimes changes if there is sickness, but they never let me down."

Using medicines safely

- People were supported to receive their medicines safely.
- Where people were prescribed topical medicines, such as creams, clear directions of where these should be applied were not always recorded. Where people were prescribed as and when required medicines, person-centred details of when this medicine should be given were not always in place. We discussed this with the registered manager who took immediate action to address this.
- People told us they received their medicines as prescribed and on time. One person said, "Staff make sure I take my medication."

We recommend the provider reviews current best practice guidance in relation to topical cream records and as and when required medicines and takes action to update their practice accordingly.

Preventing and controlling infection

- People were protected from the risk of infection as staff were following safe infection prevention and control practices.
- Staff were provided with adequate personal protective equipment (PPE) and regular spot checks were completed to ensure staff were following best practice guidance.
- People told us staff used PPE appropriately. One person said, "The carers wear gloves, masks and aprons, always. They keep this place nice and tidy."

Learning lessons when things go wrong

- The provider learned lessons when things had gone wrong.
- Thorough audits were in place in relation to safeguarding, complaints and accidents and incidents. These audits helped the registered manager identify any patterns or trends.
- Any lessons learnt were shared with the wider staff team.

Is consent to care and treatment always sought in line with legislation 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 MCA 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.

- The provider was working in line with the Mental Capacity Act.

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 Good. At this inspection the rating has remained 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

- A clear auditing system was in place to monitor the quality and safety of the service.
- Audits had been effective in identifying shortfalls. Action taken as a result of any shortfalls found were clearly recorded.
- The registered manager was clear about their role and responsibilities and was passionate about providing good quality care. One staff member told us, "[Registered manager] is very approachable. They deal with requests in a timely manner, and they are always on the other end of the phone to offer assistance."
- The nominated individual visited the service on a monthly basis to offer support and oversight and drive forward improvements. The registered manager told us the nominated individual was extremely supportive and actively involved in the service.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

- People and staff told us the service had an open, honest, positive culture.
- People spoke highly of the registered manager and staff team and their commitment to the service. Comments included, "I find all the staff to be very approachable. I could ask them anything. They are friendly and professional" and "The staff at Firstpoint are absolutely wonderful. I can't say a bad word about them. I trust them and nothing fazes them."
- People and their relatives knew who the registered manager was. The registered manager regularly engaged with people either via telephone or in person.

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

- The registered manager understood their responsibility to be open, honest and apologise if things went wrong.
- People, relatives and staff were regularly asked to provide feedback on the service. Action had been taken when suggestions were made. One person told us, "I feel listened to by all the staff. I have completed questionnaires before too. Nothing is ever too much trouble."
- The service had strong links with the local community. Newsletters were distributed to people who used the service to keep them up to date with things happening at Firstpoint Homecare Darlington, as well as

events in the local community.

Working in partnership with others

- The service had strong links with other professionals. This had resulted in positive outcomes for people.
- The provider's thorough assessment process helped identify any additional support a person may benefit from. The registered manager worked with other professionals to ensure this support was implemented.
- The registered manager had a good support network. They regularly met with registered manager from the provider's other locations to share best practice.