

Nu Staff Image Plan Limited

# Nu-Staff Image Plan Limited

## Inspection report

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Date of inspection visit:  
24 September 2019  
01 October 2019  
03 October 2019

Date of publication:  
28 October 2019

## 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

Nu-Staff Image Plan Limited is a domiciliary care agency. It provides personal care to people living in their own homes. At the time of this inspection 30 people were receiving care and support from the service.

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

People felt safe and well supported. Care was well planned, visits were organised and care was responsive to people's individual needs. Staff knew people well and understood and respected their choices and preferences.

The service supported people to access healthcare services and were encouraged to be involved in decisions about their care. Partnerships with other agencies and health professionals enabled effective outcomes for people.

Staff supported people to take medicines safely. Risks to people were assessed and regularly reviewed. Staff had completed safeguarding training and understood their role in identifying and reporting any concerns of potential abuse or poor practice.

People and relatives told us they could confidently raise any concerns, and these were addressed appropriately.

There were sufficient numbers of trained, experienced staff to meet people's needs. Safe recruitment practices were followed, and appropriate checks completed to ensure that only suitable staff were employed. Staff received induction and on-going training and support that enabled them to carry out their roles positively and effectively.

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 supported this practice. People, and where appropriate their relatives, were involved in decisions about their care.

Governance systems and oversight of the service was robust. Issues were identified, and actions taken to address any shortfalls.

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

The last rating for this service was good (published 30 March 2017).

### Why we inspected

This was a planned inspection based on the previous rating.

### Follow up

We will continue to monitor information we receive about the service until we return to visit as per our re-inspection programme. If we receive any concerning information we may inspect sooner.

## 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 ●

# Nu-Staff Image Plan Limited

## 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. This inspection was planned to check whether the provider was meeting the legal requirements and regulations associated with the Act, 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 team consisted of 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. Their area of expertise was with older people.

#### Service and service type

Nu-Staff Image Plan Limited is a domiciliary care agency. It provides personal care to people living in their own homes.

The service had a manager registered with the Care Quality Commission. This means 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 visit. We needed to be sure that people were informed that we would be contacting them by telephone, and we needed a manager to be available to facilitate this inspection.

Inspection activity started on 24 September 2019 and ended on 3 October 2019. We visited the office location on 24 September 2019 and 1 October 2019.

#### What we did before the inspection

We used the information the provider sent us in the provider information return. This is information providers are required to send us with key information about their service, what they do well, and improvements they plan to make. This information helps support our inspections. We also spoke with

commissioners of the service from the local social services department and clinical commissioning group to obtain their views about the service. We used all of this information to help us plan the inspection.

#### During the inspection

During the inspection we spoke with four people and eight relatives or friends. We also spoke with the registered manager and four staff.

We reviewed a range of records including five care plans and medicines records, two staff files, staff rotas and training records and other information about the management of the service. This included quality assurance records and audits, medicines records and maintenance of equipment.

#### After the inspection

We continued to seek clarification from the provider to validate evidence found. This including seeking staff opinions via email and contacting health professionals and commissioners to ask for their view of the service. We received feedback from five staff and two health professionals.

We also looked at training data and quality assurance records and analysed all the information we had gathered.

# Is the service safe?

## Our findings

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

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant people were safe and protected from avoidable harm.

### Using medicines safely

- People received their medicines when they were needed and in ways that suited them. There were systems in place to ensure this was done safely.
- People had their medicines administered by staff who had completed safe management of medicines training and had their competencies checked regularly. A relative told us, "Staff help with medication and it works well. They make notes when they have administered the meds." People also confirmed that staff provided them with a drink to help them swallow their medicines.

### Systems and processes to safeguard people from the risk of abuse

- Staff fully understood their role in protecting people from abuse and had received appropriate training on safeguarding adults.
- The registered manager had a good knowledge of safeguarding and understood how to raise concerns with the local authority if this became necessary.
- A health professional confirmed that, following an incident while a person was in hospital, the service had taken appropriate action to report the incident and protect the person. Another health professional said, "The staff are excellent at reporting concerns as are the management."

### Assessing risk, safety monitoring and management

- Staff understood the actions they needed to take to minimise the risk of avoidable harm. One person told us, "I feel safe with the carers. They come and have a chat."
- People told us they felt safe and well cared for. A relative told us, "I definitely feel [person's name] is safe with them. I feel [person's name] is well looked after and I know that if I am away they will be well cared for."
- Assessments were carried out to identify any risks to people and to the staff supporting them. This included environmental risks in people's homes and any risks in relation to people's care and support needs.
- Individual risk assessments detailed the action staff should take to minimise the chance of harm occurring to people or staff.
- There was a contingency plan in place in case of events that effected the service running safely, such as staff sickness, problems with the office or adverse weather.

### Staffing and recruitment

- Recruitment practices were safe. The relevant checks had been completed before staff worked with people in their homes.
- People were supported by enough staff to meet their needs. Staffing arrangements provided the flexibility

to meet people's changing needs whilst ensuring consistent care. A relative told us, "Generally we get the same carers. We have the same morning carers and afternoon and evening carers are the same too. New carers are shadowed." Another relative said, "There is good continuity."

- People described the staff as reliable and confirmed that they stayed for the agreed length of the visit and only left earlier if asked to do so. One person told us, "The carers are not youngsters. They are mature carers who know what they are doing."
- One person and two relatives commented that there were rare occasions when staff were late but also confirmed that office staff always inform them if this is the case. Rotas showed the suitable times for travelling between visits was scheduled for staff. Staff also confirmed that they were able to request additional travel time if there was a recurring issue with the amount of planned travel time.

#### Preventing and controlling infection

- People were protected from the risk of infection because staff were trained in infection control. Everyone we spoke with said the staff put their training into practice.
- Staff told us they were supplied with personal protective equipment for use to prevent the spread of infections.

#### Learning lessons when things go wrong

- Accidents and incidents were reviewed and analysed by the registered manager so that any trends could be identified, and learning could be facilitated.
- Accidents and incidents were seen as an opportunity to reflect on practice and continually improve outcomes for people.

# 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.

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. 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

- People's care needs and choices were assessed before the service started to provide any care or support and were then regularly reviewed.
- Assessments had been completed in line with current legislation, standards and good practice guidance and the information was used to create person centred care and support plans.
- Assessments included gathering information about people's cultural, religious and lifestyle choices and any equipment that was needed such as key safes, storage of medicines and telephone emergency alarm systems.

Staff support: induction, training, skills and experience

- People told us their needs were met by staff with the right skills, experience and attitude for their roles. A relative told us, "I think the carers are really well trained."
- Staff told us they received training that was effective and felt sufficiently skilled to carry out their roles. A health professional told us, "I have provided training on the use of equipment such as sleep systems and the staff all appeared interested and engaged."
- Staff were knowledgeable about their roles and how to provide the correct support to meet people's needs. A member of staff told us, "I found the training I have received very interesting and helpful; refreshing on prior knowledge and learning lots of new things."
- Staff completed a comprehensive induction and did not work unsupervised until they and the management team were confident they could do so. An ongoing programme for updates and refresher training was in place. A member of staff told us, "My shadowing shifts were thoroughly enjoyable, informative and I got all the support I required. They clearly have a passion for the job that they pass on to all the newbies."
- Staff said they felt well supported by their manager and told us they had regular supervision meetings which allowed them to discuss their performance, concerns or training and development needs.

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

- People were supported by staff who understood their food and drink needs and preferences. A relative told us, "The carers prepare breakfast and lunch. [person's name] doesn't eat well. They gently persuade and have taken advice on board."
- Care plans reflected the support the person needed to eat and drink.
- Staff had received training in how to support people with eating and drinking.

Staff working with other agencies to provide consistent, effective, timely care

- Collaborative working with other agencies, such as GPs and district nurses, had ensured effective care and improved people's quality of life. A health professional told us, "They feedback any problems they are encountering with care needs and their notes, care plans and risk assessments are accurate and up to date."
- Staff spoke knowledgeably about people's health needs and records showed they had been proactive in seeking guidance and support from health professionals.

Supporting people to live healthier lives, access healthcare services and support

- People were supported to access healthcare services when they needed this. This included support from GP's, community nurses, opticians and chiropodists.
- People told us this was done in a timely way and records confirmed this. A relative told us, "The carers have called in a GP before now and paramedics if necessary. They notice any extra health needs."
- Records showed that instructions from healthcare professionals were carried out.

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.

- Staff knew about people's individual capacity to make decisions and understood their responsibilities for supporting people to make their own decisions.
- People told us they were encouraged to make decisions for themselves and felt involved in making choices wherever possible. A relative told us, "Carers have asked [person's name] for consent before they help her. They will also try to persuade her in a very sensitive way."
- People had signed their care records to show that they consented to the care and support they were being provided with.
- Training records confirmed that staff had undertaken training in relation to the MCA.

# 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 the last inspection this key question was rated as good. At this inspection this key question has remained the same. 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 staff spoke highly about how caring and supportive the service was. One person told us, "The carers are very nice. All are different, but all are very kind. They bring everything to me to put on my trolley. We have a laugh."
- Staff understood and respected people's lifestyle choices. When we discussed with staff the people they supported, they demonstrated an open, non-judgemental attitude that respected people's diversity.

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

- Everyone we spoke with felt included in how their care and support was planned and delivered. They confirmed they had opportunities to have their opinions heard.
- If people needed independent support with making decisions, the registered manager had information available about advocacy services.

Respecting and promoting people's privacy, dignity and independence

- People confirmed that staff were respectful of their privacy, dignity and independence. A relative told us, "[person's name] is always treated with dignity. Carers have picked up how to care for her quickly. They are sensitive when they are washing her. She is supported well at all times."
- People were supported to be as independent as possible. Care plans reflected what people were able to do for themselves and how to encourage them to do this. A relative told us, "Carers always go out of their way and are empathic. They always shut doors and respect her privacy." Another relative said, "The carers are all fantastic. All friendly, lovely, do whatever I ask. [person's name] loves them and there are no negatives at all."
- People's personal information was kept secure and staff understood the importance of maintaining secure documents and care records to ensure people's confidentiality was maintained.

# Is the service responsive?

## Our findings

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

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. 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

- People said staff provided them with the care and support they required; they told us they felt well cared for and were consulted about what they needed. A relative told us, "I have used another agency too but was so impressed with Nu Staff that I changed all the care to them."
- The staff team were knowledgeable about people's personal history, which enabled them to have meaningful conversations. All staff confirmed that care plans and other records contained good detail to enable them to meet people's care needs. A member of staff said, "I think the blue folders in people's houses are very well put together. Clear care plans and medicines sheets."
- Care plans were personalised and detailed clearly how the person wanted their needs and preferences met. Each person's plan was regularly reviewed and updated to reflect their changing needs. A relative told us, "The carers are very thorough. A lot of information was taken at the start and is always updated."

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 communication needs were assessed and detailed in their care plans. This documented the person's preferred method of communication, any impairments that could affect communication, and guided staff on the best ways to communicate with them.
- The registered manager confirmed they could provide large scale print of any documents if required for people with sight difficulties and could change documents to suit most needs.

Improving care quality in response to complaints or concerns

- People were given information about the service and how to complain when they first started to receive support from the service.
- People told us they knew how complain if they needed to and felt confident that they would be listened to.
- The complaints procedure explained how to make a complaint and set out how people could expect any concerns or complaints to be dealt with.
- Complaints were acknowledged, investigated and resolved in line with this policy. A relative told us, "I am only aware of one complaint and it was dealt with. The manager deals with problems immediately."

End of life care and support

- The service was not supporting anyone with end of life care needs at the time of our inspection.
- People had been given the opportunity to discuss their end of life wishes and these were documented where they had chosen to do so.

# 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 the last inspection this key question was rated as good. At this inspection this key question has remained the same. 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

- People, relatives and staff expressed confidence that the service was well run. A relative told us, "The agency is managed well. I can always get through to someone and they get back to me when I have raised an issue."
- A member of staff told us, "I have thoroughly enjoyed working for Nu Staff. I think they are very well led and provide an outstanding level of care. People's needs are always met and our care is always person centred. I am proud to work for Nu Staff."
- The registered manager and staff were clear about their roles and responsibilities and felt well supported by the registered provider. People and staff said there was a clear management structure in place and that they were always responsive to any issues raised. A member of staff told us, "[registered manager] is an amazing manager, the best boss I have had. She is well organised, approachable and very fair."
- Staff spoke positively about teamwork. A member of staff told us, "I have appreciated the praise and positivity which has made me feel I am doing something well. I feel very much part of a team."
- The registered provider continually monitored the quality of the service provided to people. Surveys were sent to people as well as discussions with people during reviews and unannounced spot checks on staff. This meant they were continually checking to ensure that people received the best possible care and support.
- Records of staff meetings, quality assurance and audits showed that when issues were identified, these were shared appropriately and action was taken to address any shortfalls.
- Spot checks were carried out to ensure staff were following their training and meeting people's needs. A member of staff told us, "We are regularly monitored to see if we are following policy and care plans. Feedback is always helpful."
- Legal requirements, such as displaying the rating from the last inspection and notifying CQC of significant incidents, were met.

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

- The registered manager and staff were motivated to provide the best possible person-centred care and support for people. A relative told us, "The management is really good. I know what bad care is like, so I am in a position to appreciate good care. The manager will ring me if there are any concerns. I appreciate having a consistent team."
- People and staff told us the registered manager was very approachable and that they would have no

hesitation in raising concerns or making suggestions. Another relative told us, "Management is good, and the office staff are good too. Good communication all round. I have recommended the agency to others."

- The registered manager explained that the ethos of the service is to put people first; to enable them to stay at home for as long as possible and live well. A member of staff told us, "Nu Staff provide us with plenty of time during our visits to perform our jobs well. If extra time is needed, it is never refused. Timings of our visits are person centred and if, on occasion, someone wants an earlier or later visit, the office try their best to accommodate."

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 promoted the ethos of openness and learning from mistakes. This reflected the requirements of the duty of candour. The duty of candour is a legal obligation to act in an open and transparent way in relation to care and treatment. A member of staff told us, "We are encouraged to ring the office or on call if we have any concerns for clients, safety, health or wellbeing or just need support or advice. Issues are promptly dealt with."

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

- People were encouraged to express their views and suggestions about the service via face to face meetings with staff, surveys and reviews of their care. This information was used to improve the service and to highlight good practice or care.
- Quality assurance surveys were sent out to people annually. The most recent survey had been completed in August 2019. An analysis of responses and a report showed high rates of satisfaction. Some people had written extra comments and the report addressed these and included actions plans if necessary.
- Staff said they felt comfortable to put forward any ideas they may have to improve the care, support or wellbeing for people and were confident these would be acted upon.

Continuous learning and improving care

- There was a process of continual improvement and quality assurance in place. There was a variety of audits completed to ensure the quality of the provision was maintained.
- There was evidence of learning from incidents. Investigations took place and appropriate changes were implemented.

Working in partnership with others

- The service had established good working relationships with health and social care professionals. This enabled the service to ensure the best possible outcomes for the people they supported.
- the service was involved in the local Proud to Care campaign which raises the profile of the social care industry.