

Beacon Home Care Services Limited

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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

This announced inspection took place between 25 August and 27 October 2016. We last inspected this service in August 2014. At that inspection we found that the provider was meeting all of the regulations that we assessed.

Beacon Homecare Services Limited provides personal care and support to adults living in their own homes. The agency is based in Penrith and provides support to people in Penrith and the surrounding areas. Services offered by the agency include personal care, shopping, housework and preparing meals.

There was a registered manager employed at the service. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.

People received support from staff who they knew and who had the skills and knowledge to provide their care. The staff were kind and friendly and people looked forward to their visits. There were enough staff to provide support as people needed. All new staff were checked to make sure they were suitable to work in people's homes.

People were safe because hazards to their safety had been identified and managed. Staff were aware of how people could be at risk and took action to protect people from abuse.

People were supported to maintain their independence and to remain in their own homes. This was very important to them and they valued the support they received.

Medicines were handled safely and people received the support they required to maintain their health. People received the support they needed with preparing their meals and drinks.

People agreed to the support they received and their wishes and rights were respected.

The service was well managed. There were appropriate arrangements to ensure the effective management of the agency. People knew the members of the agency's management team and said they were friendly and helpful. The registered manager responded promptly if people raised concerns and resolved these to their satisfaction.

People were asked for their views and action was taken in response to their comments. The management team monitored the quality of the service and took action where they identified areas that could be further improved.

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.

People were protected from abuse and foreseeable risks.

There were sufficient staff to provide the care people required.
Checks were carried out when new staff were employed to ensure they were suitable to work in people's homes.

People received their medicines safely.

Is the service effective?

Good ●

The service was effective.

Staff were trained and had the skills and knowledge to provide the support people required.

People received the support they needed to prepare their meals and drinks.

People made choices about their care and agreed to the support they received. The registered manager knew about their responsibilities under the Mental Capacity Act 2005 and how to protect people's rights.

Is the service caring?

Good ●

The service was caring.

Staff were kind and friendly and treated people, their families and homes with respect. People looked forward to the care staff visiting their homes.

People were supported to maintain their independence.

Is the service responsive?

Good ●

The service was responsive to people's needs.

Care was planned and delivered to meet people's needs. If the support a person required changed, their care was reviewed

promptly to ensure they continued to receive appropriate support.

The registered manager had a procedure for receiving and handling complaints.

Is the service well-led?

Good ●

The service was well-led.

People knew the registered manager and how they could contact her.

The registered manager asked people for their views and took action in response to people's feedback.

The registered manager monitored the quality of the service. Where areas were identified that could be further improved, appropriate action was taken.

Beacon Homecare Services Limited

Detailed findings

Background to this 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.

The inspection took place between 25 August and 27 October 2016 and was announced. We gave the provider 48 hours' notice of our visit on 25 August 2016 because the location provides a domiciliary care service and we needed to be sure that the registered manager would be available to speak with us.

The inspection was carried out by one adult social care inspector.

During our visits to the agency offices we looked at the care records for six people who used the service and at the training and recruitment records for three members of staff. We also looked at records relating to how complaints were managed and how the provider checked the quality of the service.

Before our inspection we sent questionnaires to 23 people who used the service and their relatives. During the inspection we contacted seven people who used the service and four relatives by telephone and spoke with four members of the care staff. We also spoke with the registered manager and four members of the agency management team.

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 the information we held about the service, including the information in the PIR, before we visited the service. We also contacted the local authority commissioning and social work teams for their views of the service.

Is the service safe?

Our findings

People who used the service and the relatives we spoke with said they were confident people were safe. People told us that the staff helped them to remain safe in their homes. One person told us, "The staff keep us right". Another person said, "I'm sure I'm safe, I feel safe". Relatives we spoke with told us that they felt the care staff visiting their relatives had increased their safety. One relative told us, "I used to worry that Mum wasn't safe on her own, it makes me feel more confident knowing the staff visit regularly and keep an eye on her".

The staff we spoke with told us that they had completed training in how to provide people's care in a safe way. They said this had included how to identify and report abuse and safe use of equipment in people's homes. All of the staff we spoke with said they would report any concerns to the registered manager or a member of the management team and were confident action would be taken in response to any concerns they raised.

Records we looked at showed that care staff had taken action when they identified a person was at possible risk of abuse. One staff member had identified a person was at possible financial risk due to their being contacted by a bogus sales company. The staff member had supported the individual to protect themselves from risk and had also reported the concern to the registered manager of the agency. The registered manager had shared the information with other care staff so they could advise other people who used the service on how to protect themselves.

The registered manager had systems in place to anticipate and manage risks to people's safety. The service had a procedure for staff to follow if they visited a person to provide planned care but were not able to gain entry into the individual's home. All the staff we spoke with knew the procedure they had to follow if they could not access a person's home to deliver planned care. This helped to ensure people's safety.

The care staff told us that they were able to contact a senior person in the service at any time if they were concerned about the welfare of an individual they were supporting. They told us, "If I have any concerns and the office is closed, I ring the on call. There's always someone we can get hold of if we have any concerns at all".

People's care records included thorough risk assessments that had been completed to identify and manage risks associated with the delivery of their care. These included actions staff needed to take to support individuals to maintain a safe environment and risks specific to care tasks such as how to protect people from the risk of scalds while assisting them to shower or bathe. People were protected from risks because hazards to their safety were identified and managed.

People we spoke with said there were enough staff to provide the support they required. They said they usually received support from a small team of staff who they knew. They also told us that the staff stayed the agreed length of time and provided the support they required.

Some people who had completed questionnaires had shared concerns about how their care had been provided in early 2016. Some people said there had been a number of changes to the staff team who supported them and other people had said that some of their planned visits had been missed or staff had not stayed the allocated length of time. We saw that surveys that the registered provider had received from people in February 2016 had also raised similar concerns. We discussed these concerns with the registered manager of the service. They shared with us the actions they had taken in response to the concerns including reviewing how care visits were planned and how they were monitored. None of the people we spoke with during our inspection raised concerns about missed or shortened visits.

The registered manager used thorough systems when new staff were employed to make sure they were safe to work in people's homes. All new staff had to provide evidence of their good character and conduct in previous employment. They also had to obtain a Disclosure and Barring Service disclosure to check that they did not have any criminal convictions that would make them unsuitable to work in people's homes. People could be confident that new staff were checked to make sure they were suitable to work in a care service.

Some people who used this service required support from care staff in handling their medicines. Where care staff supported people with handling their medicines we saw detailed information in their care records. People told us the care staff provided the support that they needed with their medication. One person told us, "The staff have to help me by putting cream on my legs. They know what to do and I think they do a good job."

The staff we spoke with told us that they had completed training in the safe handling of medicines. They said that they were not allowed to assist people with their medicines until they had completed this training to ensure they could carry out the task safely. People received the support they required to manage their medicines safely.

Is the service effective?

Our findings

People told us that the staff who supported them knew the assistance they required and provided this. They said the staff asked for their agreement before providing their support and always respected the decisions they made. One person told us, "The staff know what to do for me, they don't need me to tell them but they do always ask what I want". Another person said, "The carers [care staff] ask what I want, they are very good that way".

All of the care staff we spoke with told us that they had to complete training before they were allowed to work on their own in people's homes. They said that they felt the training they received gave them the skills to provide the support people required. One staff member told us, "The training has been really good". Another staff member said, "When I joined [Beacon Homecare Limited] I did my training then went out with another staff member. I wasn't asked to work on my own until I felt confident, the support was really good".

People we spoke with said the staff who visited them had the skills and knowledge to provide their care. One person said, "I think the staff must be trained, they know what they're about". Another person told us, "I know the staff go on training courses, they tell me when they are off on another one".

People we spoke with told us that they had agreed to the support they wanted the agency to provide. They told us they could refuse any part of their planned care if they wished and said they were confident the staff who visited them would respect their decisions. One person told us, "The staff ask what I want, I'm sure if there was ever anything I wanted to refuse they'd respect that. But I've never needed to".

Some people who used the service required support to prepare their meals and drinks. People told us that the staff gave them choices about the meals they prepared and said that they enjoyed the meals the staff provided. One person told us, "The staff ask what I want and know how I like things. If I haven't decided what to have, they look in the fridge and give me choices, they're really very good". Another person said, "The staff make me a meal and leave me with a drink before they go. I must say, they know how to make a good cup of tea".

People we spoke with told us that they did not require support from care staff to see their doctor. One person said, "I ring the doctor myself if I need". Another person said, "My husband helps me with appointments". People's care records gave information for staff about the actions to take if they were concerned about a person's health. Some people had health conditions that required the staff to monitor their wellbeing. We saw that their care records guided staff to contact the individual's doctor if they reported feeling unwell. Another person required assistance with maintaining the integrity of their skin. Their care records guided staff to contact the district nursing team if they had any concerns with the person's health.

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 so that they can receive care and treatment when this is in their best interests and legally authorised under the MCA. We checked whether the service was working within the principles of the MCA

Everyone we spoke with told us they were able to make their own decisions about the care they received. The care records we looked at showed that people had been included in agreeing to their own care. Care staff we spoke with showed they understood people's right to consent to or to refuse aspects of their planned care. They told us, "I always ask people what they want. If someone said they didn't want a shower or to get up I'd encourage them, but it's their decision". The staff told us that if they were concerned a person was refusing an aspect of their planned care that was essential for their health or wellbeing, they would report this to the office. We also saw staff visiting the office to report concerns. This helped to protect people, while respecting their rights.

The registered manager was knowledgeable about her responsibilities under the MCA. She understood how to ensure that the rights of people who were not able to make or to communicate their own decisions were protected.

Is the service caring?

Our findings

People who used this service and their relatives made many positive comments about the staff who visited their homes. They told us the staff were "kind", "caring" and "friendly". People told us they looked forward to the staff visiting their homes and valued the support they received. One person said, "They [care staff] are friendly, helpful and very willing". Another person told us the staff who supported them were "all lovely girls" and said, "They brighten our day".

People told us that they were usually supported by staff who they knew and who knew what was important to them in how their care was provided. They told us that having staff who they knew helped them to feel comfortable receiving personal care. They told us this was important to them.

No one we spoke with raised any concerns about the staff who visited their homes. They said that they liked and trusted all the staff who supported them. People told us that they would speak to a member of the agency management team if wanted their staff team to change. One person told us, "I've never had any concerns, I get on with all my staff, but if there was ever one I didn't like I'd ask for them not to be sent again, I'm sure the office would listen to me".

Some people who used the service lived alone and could experience anxiety about their safety or the security of their homes. The care staff and managers in the service took appropriate action if people were anxious or worried. One person who received support from the agency had been very anxious about their safety and the security of their home. The staff member who had visited them identified that they were anxious and called at the agency office to share their concerns with the registered manager. The registered manager arranged to visit the person to discuss their concerns. They also contacted a member of the individual's family so they were aware the person was anxious and the actions the registered manager planned to try to reassure them.

Everyone we spoke with told us that the staff treated them, their families and their homes with respect. One person said, "The staff treat me well, they look after my things and are friendly but respectful".

We saw that people's care records gave guidance for the care staff about asking people what support they wanted and including them in decisions about their care.

People told us that the staff helped to protect their privacy and independence. They said that the care staff gave them time to carry out tasks for themselves and said all their personal care was carried out in private. One person told us, "The staff don't take over, they let me do what I can".

No one we spoke with required the support of an independent person to assist them to make decisions or to express their wishes about their care. People told us they were supported by their family in making decisions. One person told us, "My son takes care of things for me". Another person said, "If I have any worries I speak to my daughter and she sorts things out for me". The registered manager knew how to contact local advocacy services that could assist people to make decisions or express their views if they

required support. Advocates are people who are independent of the service and who can support people to make important decisions and to express their wishes.

Is the service responsive?

Our findings

People we spoke with told us that the care they received from this service supported them to remain living in their own homes. They told us this was very important to them and said they valued the service they received. Some people lived alone, they told us that they liked the care staff visiting their homes because it stopped them from feeling isolated.

People told us that the care staff who visited their homes knew the support they required and how they wanted their care to be provided. One person told us, "The staff know what help I need". Everyone we spoke with said the care staff always asked them if there was anything else they wanted them to do, before the staff left their homes. One person told us, "The staff always ask what I want them to do and they never leave before asking if there's anything else they can help with".

Most of the people we spoke with said they had a care plan that detailed the support the staff were to provide. They said they had been asked about the support they wanted and that this was written in their care plan for staff to refer to. Two people said they were unsure if they had a care plan, but knew the staff looked, and completed, records that were held in their homes. Everyone we spoke with said that the staff who visited them knew the assistance they needed and how they wanted their care to be delivered. One person said, "The carers [care staff] know me well now, they know what to do, but they still ask. We get on together very well".

The care staff we spoke with said they knew the care people required because this was written in their care plans. They said that, if the support a person needed changed, they knew to inform the staff in the agency office, so the person's support plan could be updated.

During our inspection we saw that the staff telephoned one of the managers or visited the agency office if they were concerned about a person they were supporting. The management team gave staff advice about how to support individuals if their needs changed. We saw care was very responsive to changes in a person's needs because the managers were available to advise staff and review an individual's support promptly.

People told us that, if they requested any changes to their support, the managers in the service tried to meet their request. This showed that the service was responsive to people's wishes.

The registered manager had a procedure for receiving and handling complaints about the service. Everyone we spoke with told us they knew how they could complain about the service they received. Most people told us they had never needed to make a complaint but said they knew they could "call the office" if they wanted to raise any concerns. Everyone we spoke with told us the staff employed in the office were "very helpful".

One person told us they had raised a concern about the times of their calls being changed. They said they had spoken to a member of the agency management team and the issue had been resolved to their satisfaction. This showed that, if people raised concerns, the management team in the service address the issues raised.

Is the service well-led?

Our findings

People we spoke with told us that this was "a good service" and said they would recommend it to other people. One person said, "The service I get is absolutely great, I'd certainly recommend them". Another person told us, "I've been very happy with the support, I think they give a good service."

People told us they knew the registered manager and how they could contact her if they needed. One person said, "We know the 'Boss lady', we see her quite regularly". They told us they found the registered manager to be "friendly and helpful". Another person said, "Any problems we just ring [the registered manager] and she sorts it out".

The registered manager was supported by a senior management team. The care staff we spoke with said they felt well supported by the management team in the agency. They told us the registered manager set high standards and was committed to providing a good service. All of the care staff we spoke with said they thought people who used the service received a high quality of care. They told us they would be confident speaking to a member of the management team if they had any concerns about the behaviour or conduct of another member of staff.

The management team in the agency carried out checks on the quality of the service provided including checking care and medication records. They also observed staff as they worked in people's homes to assess the quality and safety of the care provided. The managers also worked providing care to people and used this as an opportunity to gather people's views about the service they received.

The registered manager had identified areas of the service that could be further improved and had taken action to address these. People who used the service had told us that there had been issues around different staff visiting their homes in early 2016. This had also been identified by the registered manager of the service and they had taken action to try to ensure people received support from a regular team of care staff who they knew. During our inspection people we spoke with confirmed that they received support from the same team of staff and said this was important to them. This showed that the registered manager took action where they identified areas of the service that could be improved.

The registered manager used formal and informal ways to gather the views of people who used the service. These included sending surveys to people and visiting people in their homes to gather their views. During our visit to the agency offices we saw that people were also asked if they were happy with the service when they telephoned or visited the office. Everyone told us that the staff in the office were helpful and easy to speak to if they had any concerns. People we spoke with confirmed that they were asked for their views and said action was taken if they raised any concerns.

Providers of health and social care services are required by law to inform the Care Quality Commission, (the CQC) of significant events that affect the service or people who use it. These include allegations of abuse or serious injury of a person using the service. The registered manager had ensured that all required notifications had been made promptly. This meant we could check that appropriate action had been taken.

