

Mr Baldeep Singh Chatwal

Park House Community Care

Inspection report

Office 7, Channel Business Centres
Ingles Manor, Castle Hill Avenue
Folkestone
Kent
CT20 2RD

Tel: 01303858119

Website: www.parkhousecare.co.uk

Date of inspection visit:
19 April 2017

Date of publication:
08 May 2017

Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Summary of findings

Overall summary

Care service description

Park House Community Care provides care and support to adults in their own homes. The service is provided to mainly older people and some younger adults and people who have a learning disability. At the time of the inspection there were 24 people receiving support with their personal care. The service provided care and support visits to people in Folkestone, Hythe, the Romney Marsh and surrounding areas. It provided short visits to people as well as covering shifts over a 24 hour period to support people.

Rating at last inspection

At the last inspection, the service was rated Good and Requires Improvement in the 'Safe' domain.

Why we inspected

We carried out an announced comprehensive inspection of this service on 25 January 2016. A breach of legal requirements was found relating to managing risks associated with people's care and support. After the comprehensive inspection, the provider wrote to us to say what they would do to meet legal requirements in relation to the breach of Regulation 12 of the Health and Social Care Act Regulated Activities Regulations 2014, Safe care and treatment. We undertook this focused inspection to check that they had followed their plan and to confirm that they now met legal requirements. This report only covers our findings in relation to those requirements. You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Park House Community Care on our website at www.cqc.org.uk

Why the service is rated Good.

People told us they felt safe when they received care and support from Park House Community Care. People and relatives were happy with the care and support people received. One person said "I am extremely lucky, they (staff) are very nice people and considerate. I really appreciate Park House".

People received their medicines safely and when they should. There were systems in place to ensure medicines were managed safely.

Risks associated with people's care and support were assessed and staff took steps to keep people safe. Equipment staff used was serviced regularly and monitored to ensure it was safe.

Staff knew how to recognise and respond to abuse. They had received training on how to keep people safe.

Accidents and incidents were very low in number, but were recorded and appropriate action taken to reduce the risk of further occurrences.

People were protected by safe recruitment procedures and had their needs met by sufficient numbers of staff.

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 given their medicines safely and at the right times.

Risks associated with people's care and support had been assessed and steps were in place to keep people safe.

People were protected by safe recruitment procedures and there were sufficient numbers of staff to meet people's care and support needs.

Park House Community Care

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 checked 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.

We undertook an announced focused inspection of Park House Community Care on 19 April 2017. This inspection was carried out to check that improvements to meet legal requirements planned by the provider after our 25 January 2016 inspection had been made. We inspected the service against one of the five questions we ask about services: is the service Safe? This is because the service was previously not meeting legal requirements. This inspection was carried out by one inspector.

The provider did not complete a Provider Information Return (PIR), because we carried out this inspection before another PIR was required. 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. Prior to the inspection we reviewed other information we held about the service, we looked at the previous inspection report and any notifications received by the Care Quality Commission. A notification is information about important events, which the provider is required to tell us about by law.

During the inspection we reviewed people's records and a variety of documents. These included five people's risk assessments, medicine records and daily reports made by staff, three staff recruitment files, staff training records, incident reports, quality assurance survey results and the safeguarding policy.

We spoke with two people who were using the service, three relatives, the registered manager, and the provider and five members of staff. Before and after the inspection we contacted a social care professional who had recently had contact with the service, their feedback was positive.

Is the service safe?

Our findings

People and relatives told us they felt safe when staff were in their homes and when they provided care and support.

At the last inspection in January 2016 improvements were required to ensure risks associated with people's care and support were managed safely.

The provider wrote to the Commission and told us they had taken action to address the shortfall identified during that inspection and we found during this inspection that to be the case.

At the previous inspection people were not fully protected against the risks associated with their care and support. Not all risk assessments were reviewed once they were completed to keep them up to date and ensure people remained safe. Part of the risk assessment included assessing risks associated with people's medicines. This identified who managed the person's medicines, but where the arrangements were different for topical medicines this was not identified within the risk assessment.

Action had been taken and there were improvements to risks assessments. Risk assessments had been reviewed regularly and updated as required. There was clear information about the management of medicines including any topical medicines.

People told us they received their medicines safely and when they should. In the provider's recent quality assurance survey people indicated that they were satisfied with the help given by staff when taking their medicines. There was a clear medicines policy in place. Staff had received training in medicine administration and observations of administration were undertaken to ensure their competency. Where medicines were prescribed 'as required' or 'as directed' there was guidance in place to ensure staff handled these consistently and safely.

A new daily report book had been introduced and this ensured that visual checks were undertaken on any equipment used at each visit.

The registered manager told us they had a risk assessment in place in the event of bad weather. These included measures, such as access to 4x4 vehicles, using apps and text messaging to update staff and staff working locally to where they lived, to ensure people would still be visited and kept safe.

In the provider's recent quality assurance survey people indicated that they felt safe when staff were with them. There was a safeguarding policy in place, which had recently been reviewed and updated. Staff had received training in safeguarding adults; they were able to describe different types of abuse and knew the procedures in place to report any suspicions or allegations. There had been one safeguarding alert since the last inspection and this was discussed with the registered manager. The incident was clearly recorded together with the investigation and learning outcomes. Following the alert a new daily report book had been developed, this included checks on medicine administration and details of staff's communication with the

office or on call staff. The book was brought into the office more frequently and was subject to an audit by the registered manager. Staff told us they liked the new book as it was easier to pick up errors and information was much clearer.

People had their needs met by sufficient numbers of staff. People and relatives told us staff arrived when they expected them and stay the full time. Records showed that spot audits were used by senior staff to check staffs arrival times and ask people if there were any concerns. Staff told us that schedules allow time to get to visits and if there was ever a problem this was addressed.

People's visits were allocated permanently to staff rotas where possible and these were only then changed when staff were on leave. Staff usually worked in a geographical area and the coordinator and registered manager kept staffing numbers under constant review. This was a small service and if there were high levels of sickness or an emergency senior staff covered visits. There was an on-call system covered by senior staff and the registered manager. Staff told us the on-call was reliable, always answered promptly and gave good support.

People were protected by robust recruitment procedures. We looked at three recruitment files of staff that had been recruited since the last inspection. Recruitment records included the required pre-employment checks to make sure staff were suitable and of good character.