

Westminster Homecare Limited

Westminster Homecare Limited (North London/Herts)

Inspection report

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Date of inspection visit:
11 June 2021

Date of publication:
15 July 2021

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

Westminster Homecare Limited (North London/Herts) is a domiciliary care agency providing personal care to people living in their own homes and flats. At the time of our inspection the service was providing care and support to a total of 180 people, of which 123 people received care in their own home and 57 people received care in their flats within extra care schemes.

Not everyone who used the service received personal care. The Care Quality Commission (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 and what we found

People spoke positively about the care they received. They also told us they felt safe with care workers in their homes and this was confirmed by relatives we spoke with.

Staff understood their responsibilities with regards to safeguarding people and had completed appropriate training. Systems were in place to safeguard people from the risk of possible harm. Recruitment procedures were in place.

Appropriate assessments were carried out to ensure people's needs could be met. Where risks were identified, there was guidance in place for staff to ensure that people were safe.

Arrangements were in place in respect of medicines management. The service had a comprehensive system for auditing medicines administration.

People and relatives told us that care workers were punctual. The service monitored punctuality using an electronic homecare monitoring system. Management reviewed call logs to help identify areas in which they can improve timekeeping.

Staff we spoke with told us they were well supported by the registered manager and their colleagues. They said that management were approachable and they felt valued working at the service.

The service had a comprehensive system in place to monitor the quality of the service being provided to people. This involved telephone calls, homes visits and a survey. Quality assurance systems and processes included audits and checks which monitored key aspects of service provision.

Rating at last inspection

The last rating for this service was requires improvement (published 03 December 2019).

Why we inspected

We previously carried out a comprehensive inspection of this service in October 2019. One breach of legal requirement was found. The provider completed an action plan after the last inspection to show what they would do and by when in relation to medicines management.

We undertook this focused inspection to check they had followed their action plan and to confirm they now met legal requirements. This report only covers our findings in relation to the Key Questions Safe and Well-led. The ratings from the previous comprehensive inspection for the key questions not looked at on this occasion were used in calculating the overall rating at this inspection. The overall rating for the service has changed from requires improvement to good. This is based on the findings at this inspection.

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

Follow up

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

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?

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.

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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 Care Act 2014.

Inspection team

The inspection was carried out by two inspectors. Following the site visit, one expert by experience telephoned people who received care from the service and relatives to obtain feedback about their 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.

Service and service type

Westminster Homecare Limited (North London/Herts) provides personal care to people living in their own houses and flats in the community. It also provides care and support to people living in three extra care living settings so that people can live in their own home as independently as possible. It provides support to people of all ages living with a range of needs including, learning disabilities, mental health conditions, sensory impairments and physical disabilities.

People's care and housing are provided under separate contractual agreements. The CQC does not regulate premises used for extra care support; this inspection looked at people's personal care and support.

At the time of this inspection, there was a registered manager in post. A registered manager is 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 two working days' notice of the inspection because the service provides care to people in their own homes and extra care living settings and we wanted to make sure that management were available on the day of the inspection site visit. We also gave notice of our visit so that management could seek agreement from people using the service to us visiting them in their extra care living settings.

Inspection activity started on 11 June 2021 and ended on 24 June 2021.

What we did before the inspection

Before the inspection visit, we reviewed information we had received about the service since the last inspection. This included information about incidents the provider must notify us of, such as any allegations of abuse. 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.

During the inspection

We visited the office location on 11 June 2021 to see management staff and review a range of records which included people's care records, medication records, staff files in relation to recruitment and governance records. On the same day we visited one extra care living setting and met and spoke with four people who used the service.

During our site inspection we spoke with a total of ten staff which included operations director, operations manager, registered manager, team leader, care coordinator and care workers.

After the inspection

One expert by experience telephoned people who received care from the service and relatives after the inspection. They spoke with ten people who received care from the service and 16 relatives about their experiences of the service. We spoke with nine care workers. We also had contact with two external healthcare professionals.

We continued to seek clarification from the provider to validate evidence found.

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, this key question was rated requires improvement. At this inspection this key question has now improved to good. This meant people were safe and protected from avoidable harm.

At our last inspection the provider had failed to ensure their medicines management systems were effective. This was a breach of Regulation 12 (Safe care and treatment) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. During this focused inspection we found that these shortfalls had been addressed and the provider was no longer in breach of regulation.

Using medicines safely

- At the time of this inspection, the service provided medicines support to 107 people.
- The previous inspection found that medicines were not always managed safely and we found a breach of regulation in respect of this. During this focused inspection, we found that the service had made significant improvements to their medicines management system.
- The previous inspection found that care support plans and Medication Administration Records (MARs) did not always detail what medicines people were prescribed and administered. During this focused inspection, we found the service clearly documented in people's care support plan what medicines were prescribed, the dose and time they should be administered. MARs also clearly listed the medicines prescribed so that medicines were identifiable.
- Staff were trained in the safe handling of medicines. Where staff required further medicines support and training, they were provided with one to one additional training and mentoring.
- During the previous inspection we noted that where people were prescribed medicines on a when required basis (PRN), there was not a detailed protocol in place to advise staff on what circumstances and how to give these medicines. During this focused inspection, we found that clear guidance was now in place.
- Since the previous inspection, the provider had made improvements to their medicines audit system. We looked at a sample of these and found they were comprehensive. They identified various aspects of medicines management; identified discrepancies on MARs and clearly documented subsequent action taken by the service.

Systems and processes to safeguard people from the risk of abuse

- People told us that they felt safe when receiving care and support from care workers. One person said, "Yes I do feel safe with them in my home." Another person told us, "Yes I do feel safe and well cared for. I can't really say why but they just seem to know their jobs and that gives me confidence with them." People's relatives told us they were confident people were well looked after when receiving care and support from staff. One relative said, "[My relative] is safe with [care workers], there have been no incidents at all whereby [relative] hasn't been feeling safe." Another relative told us, "[My relative] feels safe with them and if they have any concerns they do not hesitate to let me know."
- Appropriate policies and procedures were in place to safeguard people from abuse.
- Staff were aware of action to take if they suspected people were being abused. Staff received training in

safeguarding people.

Assessing risk, safety monitoring and management

- Our previous inspection found that potential risks to people's safety were not always clearly documented in a formal risk assessment and we made a recommendation in respect of this. During this inspection, we found that the service had addressed this. Risk assessments were comprehensive and identified potential risks. They included detailed guidance for staff to mitigate risks to people covering areas such as diabetes, skin integrity, moving and handling and medication.
- Feedback we received indicated that care workers were mostly on time and there were no issues with regards to care workers' punctuality and attendance. One person said, "They are always on time, but I have a number to call if I needed to. I have had no missed calls and usually have the same carers but if there is a change they let me know." Another person told us, "They are always on time and have never not turned up or been late." One relative said, "I would say 99.9% of the time they turn up on time."
- The service monitored care worker's timekeeping and attendance using an electronic system which operated on a real time basis. The system would flag up if care workers had not logged a call to indicate they had arrived at the person's home or that they were running late.
- Management reviewed call logs to help identify areas in which they can make improvements.

Staffing and recruitment

- Staff records showed recruitment and selection processes had been carried out to ensure suitable staff were employed to care for people. A range of checks were completed. These included obtaining references and undertaking a criminal record check to find out whether a prospective employee had been barred from providing a regulated activity such as personal care to adults.
- The registered manager confirmed that they were safely able to meet people's needs with the current number of care workers they had, and this was confirmed by care workers we spoke with.

Preventing and controlling infection

- Suitable arrangements were in place for the control and prevention of COVID-19 and other infections. Staff had received appropriate training in infection prevention and control and COVID-19.
- People told us that care workers wore PPE. One person said, "They all wear the PPE. I have no complaints so far." One relative told us, "They all wear the PPE and seem professional in how they deal with [my relative]." Another relative said, "They all wear the PPE correctly."
- Management confirmed that care workers always had sufficient PPE such as gloves, aprons and masks. This was confirmed by care workers we spoke with. They told us they had never experienced shortages with gloves, aprons and masks. One care worker said, "We have always had enough PPE." Another care worker told us, "We have not experienced shortages."
- The service managed the control and prevention of infection. They had policies and procedures in place along with appropriate guidance. Staff we spoke with told us that this information was always shared with them so that they were kept informed of changes.

Learning lessons when things go wrong.

- A system was in place to report, record and monitor incidents and accidents to ensure people were supported safely.
- Incidents and accidents were analysed to identify trends and patterns to reduce the likelihood of their re-occurrence. Lessons learnt were then disseminated across the provider's locations to ensure that all services had an opportunity to learn from incidents.
- Guidance was provided for staff to follow to prevent a re-occurrence and to promote good practice.

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 requires improvement. At this inspection this key question has now improved to good. This meant that the service was well managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Planning and promoting person-centred, high-quality care and support with openness; and how the provider understands and acts on their duty of candour responsibility

- The previous inspection found that whilst the service carried out various checks on aspects of care provision, they had not identified the issues we found during the inspection. Since the last inspection, we observed that the service had made improvements in relation to their checks around medicines management and risk assessments.
- Comprehensive audits had been conducted by management which covered various aspects of the service including medicines management, care support plans and risk assessments, punctuality and attendance. These showed actions were documented, followed up and actioned.
- The registered manager also completed a monthly report that checked out various aspects of the service which included punctuality, missed visits, serious concerns, training and accidents/incidents.
- Systems were in place to monitor the quality of the service and to improve the service delivery of care and support. The service carried out quarterly quality checks with people which included satisfaction calls, home visits and spot checks of staff.
- The registered manager understood their responsibility under the duty of candour and were open, honest and took responsibility when things went wrong and notified relevant professionals and CQC of any significant events at the service.
- Management were aware of the importance of taking responsibility when things go wrong and ensured deficiencies were swiftly put right.

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

- The service had a clear management structure in place. Staff we spoke with were clear about who they would report concerns to and felt confident that they would be listened to.
- Feedback from staff was positive in respect of communication within the service. Staff told us that they were provided with updates and information they needed promptly. One care worker said, "Communication is very good here. We get the information we need."
- Policies and procedures were in place to ensure the service was run effectively and safely.
- Extra care services carried out monthly staff meetings and daily handovers to ensure staff were kept up to date with any changes and had the opportunity to share good practice.
- The office communicated with staff in numerous ways which included telephone calls, texts, emails and supervision sessions.

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

- When asked about management of the service, the majority of people and relatives we spoke with spoke positively about how the service was operating. One person told us, "I find the office very helpful and I would say it is well managed." One relative said, "I would say it is well managed and would have no problem with calling with anything I was worried about. I feel they would soon sort out anything. I would give them 10/10." Another relative told us, "Yes we have confidence in the management."
- Care workers we spoke with told us that staff morale was positive and they enjoyed working at the service. They told us they felt well supported and valued. They also spoke positively about the way the service was managed. One care worker told us, "Good working relationship here. This is the best working environment I have worked in. I am confident here. I am well supported by management. My experience of management has been positive. They are always available to help." Another care worker said, "Very good support from the management."
- The service had a quarterly newsletter that was issued to staff and people which provided information, feedback and guidance about the service.

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

- The provider asked people and relatives for their feedback through service users' satisfaction surveys and regular telephone calls. Staff had regular conversations with people and their relatives about the care they received.
- Staff meetings provided staff with the opportunity to feedback about the service and to discuss any concerns and best practice. During the pandemic, these meetings were held virtually. Staff said they were able to have open discussions and share their opinions and feedback.
- Where required, the service communicated and worked in partnership with external parties which included local authorities and healthcare professionals and we saw documented evidence of this. Healthcare professionals we communicated with spoke positively about the service and did not raise concerns.