

Pacific Care Services (London) Limited

Pacific Care Services London

Inspection report

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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

Pacific Care Services London is a domiciliary care agency providing the regulated activity of personal care. The service provides personal care to people in their own homes. 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 our inspection there was one person using the service.

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

People expressed satisfaction with the service. This was summed up by one person who told us, "My main carer is one of the best carers I have ever had. They are a quick learner and really understanding."

Systems were in place to help safeguard people from abuse. Risk assessments were in place which set out the risks people faced and included information about how to mitigate those risks. There were enough staff to meet people's needs and robust staff recruitment practices were in place. Steps had been taken to help prevent the spread of infections. Systems were in place for investigating accidents and incidents.

Quality assurance and monitoring systems were in place to help drive improvements at the service. There was an open and positive culture at the service, which meant people, relatives and staff could express their views. The provider worked with other agencies to develop best practice and share knowledge.

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 26 October 2017).

Why we inspected

We undertook this inspection as part of a random selection of services rated Good and Outstanding.

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.

Pacific Care Services London

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 was carried out by one inspector.

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 service is required to have a registered manager. A registered manager is a person who has registered with the Care Quality Commission to manage the service. This means that they and the provider are legally responsible for how the service is run and for the quality and safety of the care provided.

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

Notice of inspection

We gave the service 48 hours' notice of the inspection. This was because it is a small service and we needed to be sure that the provider or registered manager would be in the office to support the inspection.

During the inspection

We spoke with one person who used the service. We spoke with two staff, the registered manager, (who was

also the provider), and a care assistant. We reviewed a range of records. This included one person's care records. We looked at two staff files in relation to recruitment. A variety of records relating to the management of the service were reviewed, including various policies and procedures.

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. The rating for this key question has remained Good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- Systems and processes were in place to protect people from the risk of harm. The provider had policies in place around financial protection of people, whistleblowing and safeguarding adults. This latter policy made clear their responsibility to report any allegations of abuse to the local authority and the Care Quality Commission. The registered manager told us there had not been any safeguarding allegations in the past year, and we found no evidence to contradict this.
- Staff had undertaken training in safeguarding adults and were aware of their responsibility to report any suspected abuse. One member of staff told us, "I have to report it immediately to my manager. If they don't do anything, I have to report it to the council."
- To help safeguard people from the risk of financial abuse, staff did not handle any money on behalf of people. Further, there was a policy which prohibited staff from receiving gifts from people.

Assessing risk, safety monitoring and management

- Risk assessments were in place for people. These set out the risks people faced and included information about how to mitigate those risks. They covered risks including moving and handling, the physical environment and personal care. Assessments were subject to review, which meant they were able to reflect the risks people faced as they changed over time.
- People told us they felt safe using the service. When asked if they felt safe, one person replied, "Yes." Staff we spoke with had a good understanding of the risks people faced and how to support them in a safe way.

Staffing and recruitment

- There were enough staff to meet people's needs and people told us staff were generally punctual and that they stayed for the full amount of time needed. One person said, "Barring the train strikes, they (staff) are pretty good (at arriving on time)."
- As only one person was using the service, the provider told us they were able to monitor that staff were punctual through regular contact with the person.
- The provider carried out various checks on prospective staff to help ensure they were suitable to work in the care sector. These included employment references, proof of identity and criminal record checks.

Using medicines safely

- The provider's support with medicines was limited to opening medicines containers for people. The person told us they managed all other aspects of their medicines. There was a medicines policy in place to provide guidance to staff in the event of the service supporting people to take their medicines in the future.

Preventing and controlling infection

- Steps had been taken to reduce the risk of the spread of infection. There was a policy in place to provide guidance about this.
- The registered manager told us staff were expected to wear personal protective equipment (PPE) when providing support with personal care. Staff and people confirmed this was the case. One person told us, "They (staff) wear masks, gloves and aprons." A member of staff said, "Yeah, we get enough PPE."

Learning lessons when things go wrong

- The registered manager told us there had not been any significant accidents or incidents in the past 12 months and we found no evidence to contradict this. There was a policy in place which stated that significant incidents should be recorded and monitored for any trends. This would enable lessons to be learned from accidents and incidents.

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. The rating for this key question 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.

Continuous learning and improving care

- Quality assurance and monitoring systems were in place to help with improving care. For example, team meetings were held. This gave the care staff and management the opportunity to discuss relevant matters, such as working with COVID-19 and issues relating to people who used the service. Staff also had one to one supervision with the registered manager so they could discuss matters of importance to them.
- The registered manager carried out unannounced spot checks. These involved monitoring staff punctuality, appearance, knowledge of the person's needs, how they interacted with the person and record keeping.
- People told us they had a good relationship with the registered manager, and that where there were problems, these were resolved. One person said, "We have a good rapport. If something is not working, I can call them, and it gets resolved as quickly as it can be. They (registered manager) are very good at changing things if need be."

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

- The provider had an open and positive culture to help achieve good outcomes for people. Staff spoke positively about the working culture and the registered manager. One staff member told us, "(Registered manager) is understanding, if we have any concerns we can go to them. (Registered manager) tells us all the time, 'Don't hesitate to contact me'."
- Care was person-centred, which helped to achieve good outcomes for people. Staff understood people's needs, and people were involved in planning their care to help ensure it reflected their wishes and preferences.

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 provider understood their obligations to be open and honest with relevant persons when things went wrong. There were systems in place to identify and address shortfalls. For example, the accidents and incidents policy made clear that accidents should be reviewed to identify any shortfalls in care provided and there was a complaints procedure in place to respond to concerns raised by people.

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

- Managers and staff were clear about their roles. Staff were provided with a copy of their job description to

provide clarity about their role and there were clear lines of accountability at the service.

- The provider was aware of regulatory requirements. For example, they had employer's ability insurance cover in place in line with legislation, and the registered manager was aware of their responsibility to notify the Care Quality Commission of significant events.

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

- The provider engaged with people and staff to seek their feedback. The registered manager told us, "I do phone monitoring, I phone the service user to find out if they are happy with the service." Records were kept of this monitoring, which included a section to record any comments people made. Comments seen were positive, with one person stating, "I am happy with the service I am currently receiving."
- People told us they had regular contact with the registered manager. One person said, "About once a month (registered manager) calls me, they ask how I feel about the carers, how am I finding the service." The same person added, "If I have any questions I can call or text (registered manager), I always get a response."
- The provider considered equality characteristic. For example, policies were in place on equality and diversity to provide guidance to staff about this issue and staff were aware of how to meet people's individual needs. Staff recruitment was carried out in line with good practice in relation to equality and diversity.

Working in partnership with others

- The provider worked with other agencies to share knowledge and help to develop best practice. For example, the registered manager attended a provider's forum that was run by the local authority. They said the recent meeting had discussed the hot weather and its implications for care providers and staff recruitment issues. The provider was also a member of Skills for Care, who provided guidance about the care sector and training.