

Pearl Home Care Ltd

Pearl Home Care Ltd

Inspection report

28 Verona Rise
Darfield
Barnsley
South Yorkshire
S73 9QW

Tel: 07415900881

Date of inspection visit:
22 June 2022
21 July 2022

Date of publication:
29 July 2022

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:

Pearl Home Care Ltd is a care at home service which provides personal care and support to older adults. At the time of our inspection there were 19 people using the service.

Not everyone who used the service received personal care. 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:

People told us they felt safe, all people spoke highly of the staff. One person said, "They [staff] are excellent, I can't recommend them enough, brilliant service." Staff understood safeguarding and whistleblowing procedures. There were sufficient staff employed to meet people's needs and staff confirmed this. Accidents and incidents were monitored. Risks to people were identified and assessments were in place for staff to follow, ensuring people's needs were met. People were protected by the prevention and control of infection. Medication systems were in place to ensure safe administration of medicines. There was a recruitment process, which was improved further following our inspection to evidence it was a robust process.

We have made a recommendation to ensure the recruitment evidence is readily accessible to evidence robust checks are completed.

Staff we spoke with were knowledgeable about people needs. Staff had received effective training to ensure their knowledge was up to date. Staff were supervised and supported. People were supported in the least restrictive way possible and in their best interests

There was an effective quality monitoring system in place. People who used the service and their relatives felt listened to and said any issues or concerns were appropriately dealt with and resolved. People's views were obtained to drive improvements. Feedback we received from staff was extremely positive about the leadership and support received for them to be able to fulfil their roles and responsibilities.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk

Rating at last inspection and update:

The last rating for this service was requires improvement (published 12 October 2018) and there was a breach of regulation. The provider completed an action plan after the last inspection to show what they would do and by when to improve.

At this inspection we found improvements had been made and the provider was no longer in breach of regulations.

Why we inspected:

This inspection was prompted by a review of the information we held about this service and to follow up on action we told the provider to take at the last inspection.

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 which contain those requirements.

For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating. The overall rating for the service has changed from requires improvement to good. This is based on the findings at this inspection.

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.

Pearl Home Care Ltd

Detailed findings

Background to this inspection

The inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 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 short 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. Inspection activity started on 22 June 2022 and ended on 21 July 2022. We visited the office on 1 July 2022.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. We received feedback from the local authority and professionals who work with the service. The provider was not asked to complete a provider information return prior to this inspection. 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 used information gathered as part of monitoring activity

that took place on 3 May 2022 to help plan the inspection and inform our judgements.

During the inspection

We spoke with two people who used the service and five relatives via the telephone about their experience of the care provided and obtained feedback from commissioners. We spoke with five members of staff including the, registered manager, team leader and care workers.

We reviewed a range of records. This included two people's care records, medication records and daily records. We looked at four staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including incidents and policies were reviewed.

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 requires improvement. At this inspection the rating has changed to good. This meant people were safe and protected from avoidable harm.

Staffing and recruitment

At our last inspection the provider failed to ensure there were robust recruitment systems followed. This was a breach of regulation 19 (Fit and proper persons employed) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 19.

- Staff were effectively deployed to meet people's needs. one relative said, "Staff do what they are supposed to do, they don't cut corners. They turn up on time, really nice care staff."
- Staff told us there were enough staff to meet people's needs safely. They said they were not rushed at calls and had sufficient allocated time between calls.
- Appropriate recruitment checks were conducted prior to staff starting work. Staff explained the recruitment procedure when they were recruited, which followed safe recruitment practices. However, the documentation was not always available to evidence this. We discussed this with the registered manager, who following our inspection reviewed all recruitment files. They produced a robust checklist to ensure all required documentary evidence was accounted for and easily accessible, to evidence staff were suitable to work with vulnerable people. We were shown the improvements at our feedback call.

We recommend the provider embeds the new checklist into practice for all new employees to evidence the robust recruitment system.

Assessing risk, safety monitoring and management

- Risks were assessed and managed to keep people safe. Care plans contained risk assessments to ensure people's safety. One relative told us, "The registered manager came and did the assessment before the care package started, they went through everything it was very thorough."
- People were involved in their care planning as much as possible and care records detailed people's choices and wishes. One person said, "They [staff] are brilliant, it's a fantastic service." Relatives also told us they were extremely happy with the care and support people received. One relative said, "I completely trust the staff, care and support is so caring and respectful, staff are extremely polite."

Using medicines safely

- Medication procedures were in place to ensure people received medicines as prescribed. Staff understood procedures to follow to ensure safe administration of medicines.

- Staff received training in medicines management and were competency assessed to ensure safe administration of medicines.

Preventing and controlling infection

- The service had systems in place to manage the control and prevention of infection (IPC). Staff were kept up to date with latest guidance and requirements.
- Personal protective equipment (PPE) was provided. Relatives we spoke with told us they always saw staff wearing appropriate PPE and regularly washing their hands.

Systems and processes to safeguard people from the risk of abuse

- People told us staff made them feel safe. Relatives we spoke with told us people were safe. One person said, "Care staff are lovely, all of them, they make me feel so safe."
- There were safeguarding policies in place. The registered manager and staff knew the process to follow to report any concerns to safeguard people.
- Staff understood the importance of the safeguarding adult's procedure. Staff knew how to recognise and report abuse.

Learning lessons when things go wrong

- The registered manager had a system in place to monitor incidents and understood how to use them as learning opportunities to prevent future occurrences.

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 the rating has changed to 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. Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements

- Quality monitoring systems were in place that were robust and effective.
- Information from the quality assurance systems were used to inform changes and improvements to the quality of care people received. Lessons learnt were completed and shared with staff to drive improvements.
- Staff were happy in their roles and felt supported. Staff spoke highly of the team, they told us there was a consistent approach to ensure all staff were supported and well led. One staff member said, "We are very well supported, we are a great team."

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people. 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 demonstrated an open and positive approach to learning and development. They were passionate about providing a good quality service to ensure positive outcomes for people they supported and staff.
- The registered manager told us the ethos of the service was to provide people with high quality care delivered by a competent supported staff team.
- The registered manager understood their legal requirements and complied with their duty of candour responsibilities. People told us staff and management kept them informed of any issues and concerns and were open and honest. Relatives spoke highly of the registered manager and told us they were kept informed of all changes and updates. One relative said, "The registered manager is always easily contactable, I can't praise her enough, she is so caring, polite and respectful."

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

- The registered manager regularly engaged with people and their relatives. Everyone we spoke with told us communication was very good.
- Staff meetings were held to get their views and to share information. Staff confirmed meetings were held regularly and were effective. They also told us the registered manager was very approachable, listened and they felt valued.

Working in partnership with others

- The registered manager had links with others to work in partnership to improve the service. This included

commissioners, health care professionals and relatives.