

Beacon Home Care Services Limited

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Inspection report

Homeleigh
William Street
Penrith
Cumbria
CA11 7UP

Tel: 01768840086

Website: www.beaconhomecare.co.uk

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Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service responsive?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

About the service

Beacon Homecare Services Limited is a domiciliary care agency providing personal care for people living in their own homes in the Penrith area of Cumbria. The service supports older people, people living with a dementia, physical disability or mental health need. They also support people who misuse drugs and alcohol.

Not everyone who used the service received personal care. Care Quality Commission (CQC) only inspects where people receive personal care. This is help with tasks related to personal hygiene and eating.

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

At the last inspection the provider had not made sure the governance systems were sufficiently effective to monitor and improve the quality and safety of the service. Since then there had been improvements in the way the management team carried out audits to check the quality of the service.

People and relatives said the service was safe and they trusted the staff. They described staff as "pleasant, courteous and friendly". People said the service was reliable. Staff arrived on time and stayed the full amount of time.

Risk assessments and care records were more personalised so staff had detailed information about how to support each person in the safest way.

People said staff made sure they wore masks, aprons and gloves to prevent the spread of coronavirus. Staff had updated training in infection control and felt supported by the provider during the pandemic.

People said staff understood how they wanted to be supported, listened to them and did what they asked. They commented the care service was personalised and met their individual preferences and needs. People described the service as "flexible" and "accommodating" whenever they asked for any changes.

People had information in ways they could understand. They felt confident about raising any issues. The service had not received any complaints or concerns since the last inspection.

People and relatives said the service was well-managed. They found it easy to contact the office and there was always someone available to take their call. People said they were asked for their feedback and office staff visited to check their care from time to time.

People and staff said the management team were open, approachable and supportive. The registered manager was committed to continuous improvement of the service.

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 23 October 2019) and there was a breach of regulation relating to good governance. At this inspection we found improvements had been made and the provider was no longer in breach of regulation.

Why we inspected

We carried out an announced comprehensive inspection of this service on 11 September 2019. A breach of legal requirements was found. The provider completed an action plan after the last inspection to show what they would do and by when to improve.

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, Responsive and Well-led.

The ratings from the previous comprehensive inspection for those 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 for Beacon Homecare Services Limited 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 re-inspection programme. If we receive any concerning information we may inspect sooner.

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 responsive?

Good ●

The service was responsive.

Details are in our responsive findings below.

Is the service well-led?

Good ●

The service was well-led.

Details are in our well-led findings below.

Beacon Homecare Services Limited

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 one inspector.

Service and service type

This service is a domiciliary care agency. It provides personal care to people living in their own homes.

The service had a manager registered with the Care Quality Commission. 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.

Notice of inspection

This inspection was announced. 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. It also supported the service and us to manage any potential risks associated with Covid-19.

Inspection activity started on 6 October 2020 and ended on 14 October 2020. We visited the office location on 8 October 2020.

What we did before inspection

We reviewed information we had received about the service since the last inspection. The provider was not

asked to complete a provider information return prior to this inspection. This is information we require providers to send us to give some key information about the service, what the service does well and improvements they plan to make. We sought feedback from the local authority and professionals who work with the service. We used all of this information to plan our inspection.

During the inspection

We contacted seven people who used the service and four relatives about their experience of the care provided. We contacted 15 members of staff by email or text. We visited the office and spoke with the registered manager and office and safety manager.

We reviewed a range of records. This included two people's care records and multiple medicine records. We looked at a staff file in relation to recruitment and at staff supervision records. A variety of records relating to the management of the service were reviewed, including policies and procedures.

After the inspection

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

Assessing risk, safety monitoring and management

- At the last inspection we made a recommendation about risk management records. The provider had made improvements to these records. These now clearly detailed the measures staff should take to minimise risks to individual people.
- Risk assessments were personalised and included specific areas of support each person needed to remain safe. These included, for example, risks relating to falls, skin integrity and epilepsy.
- Staff said they received sufficient information to support people in a safe and suitable way.

Systems and processes to safeguard people from the risk of abuse

- The provider continued to follow local safeguarding processes. There had been no safeguarding concerns since the last inspection.
- People and relatives said they felt safe with the service and with staff. Their comments included, "(Staff) are absolutely brilliant and my relative really trusts them" and "(Staff) are efficient and pleasant and I have no concerns about them."

Staffing and recruitment

- The provider made sure there were enough staff to provide timely support to people. People and relatives told us, "They come on time and stay the right amount of time" and "Their timekeeping is good – if there is any delay with traffic they let me know."
- The provider continued to use safe recruitment practices to make sure new staff were suitable to work in a care service.

Using medicines safely

- The provider had a safe system for assisting people with their medicines where assessment showed they required that support.
- Medicine administration records were completed. These included the time and dose of variable doses and as required medicines.

Preventing and controlling infection

- The provider had systems in place to prevent the spread of infection. The provider made sure staff had sufficient personal protective equipment to work safely.
- People and relatives confirmed the care staff wore masks, gloves and aprons, when they visited their home. Staff said they had training in infection control and Covid-19 and were "fully equipped".
- The provider's infection prevention and control policy was up to date. Detailed risk assessments were in

place about how to minimise the risk of Covid-19 infection.

Learning lessons when things go wrong

- The provider used reflective discussions and retraining to support improved practices, for example in medicines records.
- There had been no accidents or incidents since the last inspection. The office and safety manager was highly trained in health & safety and would carry out root cause analysis in the event of any significant incident.

Is the service responsive?

Our findings

Responsive – this means we looked for evidence that the service met people's needs.

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 people's needs were met through good organisation and delivery.

Planning personalised care to ensure people have choice and control and to meet their needs and preferences

- At the last inspection we made a recommendation about personalised care planning. The provider had made improvements. Care plans now detailed the specific support each person required with their individual needs.
- People and relatives said staff understood how each person wanted to be supported. Their comments included, "They're very good and know how I like things done. I tell them and they do it just the way I like it!" and "Regular staff know (my relative's) intricate behaviours."
- People and relatives felt in control of their support. They told us, "Staff do everything I want and if I ask them to do anything extra they do without a fuss" and "They work alongside me really well and we share the care (of my relative)".

Meeting people's communication needs

Since 2016 onwards all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard (AIS). The standard was introduced to make sure people are given information in a way they can understand. The standard applies to all people with a disability, impairment or sensory loss and in some circumstances to their carers.

- Since the last inspection the provider had made improvements and an AIS policy was now in place.
- The registered manager described how people were supported with alternative methods of communication. For example, these included the use of a whiteboard for a person who was hard of hearing so that the person could make informed choices and instruct staff in their wishes.

Improving care quality in response to complaints or concerns

- The provider had a system for managing complaints. There had been no complaints about the service since the last inspection.
- People said they knew how to make a complaint and felt these would be acted upon. They commented, "The office staff are easy to talk to and if I wasn't happy I would say so" and "I would have no problems with telling the office if I had a complaint but I've never had one."

End of life care and support

- Since the last inspection the service had explored people's end of life wishes where this was appropriate and where the person was willing to discuss this.

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 the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

At the last inspection the provider had not always made sure that governance systems were sufficiently robust to make sure the service was effectively managed. This was a breach of regulation 17 (Good governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. Improvements had been made and the provider was no longer in breach of regulation 17.

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

- Since the last inspection, quality assurance processes had improved. The management team now carried out demonstrable audits to check the quality and safety of the service. The audits included care plans, medicines records and risk assessments.
- New detailed spot checks forms were designed to monitor the quality of staff practices. The management team planned to use spot checks, supervisions and appraisals systems to identify and support performance improvements.
- The registered manager was aware of the duty of candour. The service had a policy that set out the provider's legal responsibility to be open and honest.

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

- The service had a positive culture that was person-centred, friendly and put people at the centre of their care service. People and relatives said the care was personalised and individual choices were encouraged. People said the office and care staff were "very approachable" and "very accommodating".
- Staff said there was good team work and they were all supportive of each other to provide a good service. They commented, "Beacon Homecare do their very best and are willing to assist wherever possible" and "They go the extra mile for clients and staff."

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

- People said they had good engagement with the provider and were asked for their views from time to time. They told us, "I have had a survey and sometimes the office staff come out to work with the carers so they can see how they work and if it's ok for us" and "We can get in touch with the office if we need to, it's never a problem, there's always someone there."
- Staff said they were kept fully informed and involved. They commented, "We get a lot of support and

advice from the office" and "They're all good at listening if I have concerns about service users."

Continuous learning and improving care

- The provider and management team were committed to continuous improvement of the service.
- The management team were planning to design an annual development plan based on the outcome of audits and current survey results.

Working in partnership with others

- The registered manager stated the service had "excellent" working relationships with community health services.
- The registered manager networked with other care professionals through a national Registered Managers' group. She also kept up to date with latest best practices via the UK Home Care Association.