

Ace Homecare Services Limited

Ace Homecare 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

Ace Homecare London is a domiciliary care agency providing personal care to 50 people living in their own homes.

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

Our previous inspection identified that risk assessments were not always in place and we found a breach of regulation in respect of this. During this focused inspection, we found that the service had taken action to improve this. Appropriate risk assessments were in place and covered areas such as the environment, physical health and personal care. These also contained guidance for minimising potential risks associated with the COVID-19 pandemic. During our previous inspection we found that some calls had been missed and some calls were late. We saw that since our last inspection the service had made improvements in the monitoring of calls and people who used the service raised no concerns during this inspection.

Our previous inspection found that there were some instances where the service failed to effectively check various aspects of the service and we found a breach of regulation. During this focused inspection, we observed that the service had made improvements and had an effective system in place to monitor the quality of the service being provided to people.

People who used the service and relatives told us that they were well supported and felt safe with their care workers. One person told us, "I feel very safe with my carer. I am quite hard of hearing and she makes allowances for that in the way she communicates to me." Polices and systems were in place to safeguard people from the risk of possible harm. Care workers told us that they had received training and report any issues to the registered manager. The service had safe recruitment procedures in place. People who received assistance in taking their medicines can be assured that this was managed safely.

Care workers we spoke with told us that they felt supported by the registered manager. They told us that management were approachable and they raised no concerns in respect of this. People and relatives confirmed they were involved in their care and feedback was actively sought about the quality of the care provided.

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 14 February 2020).

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

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 Wellled which contain those requirements.

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 Ace Homecare London 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.

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 •
Is the service well-led? The service was well-led.	Good •



Ace Homecare 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 Care Act 2014.

Inspection team

The inspection was carried out by one inspector. One Expert by Experience called people who used the service and relatives to get their view about the care provided by Ace Homecare London. 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

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

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

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.

Inspection activity started on 24 March 2021 and ended 8 April 2021. We visited the office location on 24 March 2021.

What we did before the 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 took this into account when we inspected the service and made the judgements in this report. We reviewed information we had received about the service since the last inspection. 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 spoke with the registered manager. We reviewed a range of records. This included four people's care records and multiple medication records. We looked at six staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including policies and procedures were reviewed.

After the inspection -

We continued to seek clarification from the provider to validate evidence found. We looked at training data, quality assurance records, policies and procedures. We spoke with three care workers. The Expert by Experience spoke with five people who used the service and five relatives about their experience of the care provided.



Is the service safe?

Our findings

Assessing risk, safety monitoring and management

- The service assessed the risks to people's health and wellbeing. The assessment took place at the point of people's referrals. Risk assessments covered a range of different areas and were tailored to each person's unique and specific day to day care and support needs and individual health condition.
- Where risks were identified care workers were provided with guidelines on how to manage these risks and reduce the possibility of harmful events happening.
- We saw that the service undertook environmental and COVID-19 risk assessments, to ensure that care workers work in a safe environment and people were protected from unnecessary transmission of the virus.
- People who used the service told us that they had been involved and been consulted in developing and reviewing their risk assessments and risk management plans. One person told us, "Yes they have spoken with me and my carer has been a really good 'shielder' for me over the virus issues regularly updating me with things."

At our last inspection we found that some of the care calls had been missed and care workers visited people not at the times it had been agreed in their care plans. 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.

Staffing and recruitment

- Since our last inspection the service had implemented an electronic monitoring system, which required care workers to log in and out when visiting people who used the service. The electronic system alerts the office immediately if care workers were late, didn't stay the correct time or missed a visit. People who used the service told us that they were satisfied with the punctuality of care workers. One person said, "They [care workers] are very good on time and will phone me if held up for any reason. Always stay the time and never missed coming.
- The service had safe recruitment procedures, and people were supported by suitable care workers. Appropriate checks such as, enhanced criminal checks and full employment history had been completed.

Systems and processes to safeguard people from the risk of abuse

- People and their relatives thought people were safe. One person told us, "Yes, I do feel safe because they are very careful with me, don't rush and ensure I don't fall over by carefully supporting me to wash." A relative said, "Very safe indeed. What makes my relative and me feel so safe is that the carer speaks in her native language so everything is understood fully in respect of her care. This makes her feel at home."
- Care workers understood the principles behind safeguarding people from abuse. They understood what constitute abuse and who to report their concerns if they thought somebody was at risk of harm. One care worker told us, "If I saw or noticed anything, I would record it and contact the office immediately."

Using medicines safely

• Some people received support with taking their medicines. The service had a robust monitoring system

which ensured that peoples medicines was managed safely.

- Care workers had received training in the administration of medicines and their competency was assessed prior to supporting people with their medicines
- One relative told us, "She has tablets from a dosset box, usually takes herself but if doesn't they will give them to her with a drink of water and watch her take them safely."

Preventing and controlling infection

- There were suitable arrangements for the control and prevention of COVID-19 and other infections. Care workers told us that they had access to sufficient stocks of personal protective equipment (PPE) such as gloves, aprons and masks.
- The service managed the control and prevention of infection. They had policies and procedures in place along with guidance.
- People who used the service and relatives told us that they felt safe with care workers. One person said, "They [care workers] all wear full PPE, gloves, masks and aprons and always clean and tidy." One relative said, "They [care workers] all wear PPE and even overshoes which impressed me when I saw that. My relative had Covid in January so I am very protective with my relative and really careful on this but they [care workers] are excellent and clean everything up before they leave."

Learning lessons when things go wrong

- The service had a process for reporting and recording accidents and incidents. Care workers were able to tell us the process and how they would report them.
- The service ensured that accidents and incidents as well as safeguarding concerns had been analysed and monitored for trends and patterns.



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 our last inspection the provider had failed to ensure their auditing systems were robust enough to assess and improve the quality and safety of the services provided to people. This was a breach of Regulation 17 (Good Governance) 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.

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

- Since our last inspection the service had implemented a new electronic monitoring system. The system provided live updates to the office and would alert the office if care workers did not complete a task or missed to assist a person with their medicines.
- In addition to this care records had been reviewed regularly and people were contacted by the office to find out if there had been any issues with the care provided. One relative said, "They call me every three to four months to check all is ok and to ask that we are happy with things."
- Care workers told us that during the COVID-19 pandemic the service continued to undertake spot checks, which were done virtually. We saw records of these spot checks in people's care records.

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

- People who used the service and relatives told us that they had been consulted about the care and support they required. One person said, "I go through my care plan with them, I know what I want and it is all put in." One relative told us, "I do that with the agency, although like I said, my relative is independent so does have input as well."
- Care workers told us that the registered manager and all office staff were open and listened to their concerns and challenges they had with people. One care worker said, "The office staff and the manager are fabulous, I can call them and they would always listen to my problems and help me with advice."

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 knew of his responsibility under the Health and Social Care Act 2014 and the importance of notifying the CQC of any significant events at their service.
- The registered manager was aware of the importance of being open, honest and transparent in relation to the running of the service and of taking responsibility when things go wrong. Care workers told us that they

would always report issues to the office and felt confident that they would be dealt with appropriately.

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

- People who used the service and relative told us that the agency contacted them regularly to comment and feedback on the care they received. One person said, "I only recently had a discussion with them about my care and satisfaction." One relative said, "They [office] call me every three to four months to check all is ok and to ask that we are happy with things."
- The service fully considered peoples equality characteristics. For example, people and relatives spoke positively about care workers understanding their culture and speaking their language and responding positively to their disability. One relative told us, "The way my carer makes allowances for my disability. They are very patient and understanding."

Continuous learning and improving care; Working in partnership with others

- The registered manager regularly attended calls arranged by the local authority to learn from other providers. They also said that they would access training provided by the local authority. 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.
- The registered manager spoke positively about working with local authorities. They told us that the host local authority had provided support and guidance during the pandemic.
- We have received positive feedback from the local authority and the relationship they had with the service.