

Parkins Care Angels Limited

Unit 4, Bentinck Court

Inspection report

Unit 4 Bentinck Court
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Ratings

Overall rating for this service

Good 

Is the service safe?

Good 

Is the service effective?

Good 

Is the service caring?

Good 

Is the service responsive?

Good 

Is the service well-led?

Requires improvement 

Overall summary

This inspection took place on 6 May 2015. We gave the providers and registered manager three days' notice of the inspection to make sure they would be available. This was the first inspection of the service since the Care Quality Commission (CQC) registered the providers in September 2013.

Parkins Care Angels Ltd is a limited company providing domiciliary care and support to people in their own homes. Unit 4 Bentinck Court is the company's only location. When we inspected, the service was supporting

64 people. People using the service were mainly older people although the service also provided support to some younger people with a learning or physical disability.

CQC registered the service's manager in September 2013. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like

Summary of findings

registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.

The provider had systems in place to monitor the standards of care and support people received but these were not always effective. The providers had not identified errors in medicines records and care records. This was a breach of regulation 17 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

You can see what action we told the provider to take at the back of the full version of the report.

People using the service told us they felt safe with and well cared for by their care workers. Their care plans detailed the care and support they needed and people told us their care workers provided this.

The provider made sure there were enough staff deployed to support people safely and in line with their care plans.

Care workers received the training they needed to care for and support people. Where care workers needed refresher training, the providers arranged for this to take place.

People told us their care workers were kind, respectful and caring. People and their relatives said they received consistent care and support from care workers who understood their needs.

When people's needs changed, the registered manager ensured people received the support they required.

The provider had systems in place to respond to complaints from people using the service.

Summary of findings

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

The service was safe.

People using the service told us they felt safe with their care workers.

The provider had policies and procedures in place to keep people safe.

There were enough care workers to provide people with the care and support they needed.

Good



Is the service effective?

The service was effective.

People told us they received the care and support they needed.

Care workers told us they had received the training they needed to care for and support people safely and effectively.

The service asked people for their consent and agreement before care workers cared for or supported them.

Good



Is the service caring?

The service was caring.

People told us their care workers were kind, respectful and caring.

People received consistent care and support from care workers who understood their needs.

Good



Is the service responsive?

The service was responsive.

People told us they received care and support that was personalised to their needs.

When people's needs changed, the registered manager worked with community services to ensure people received the support they required.

The provider had systems in place to respond to complaints from people using the service. Most people told us they knew about the procedures but had not needed to make a complaint.

Good



Is the service well-led?

Some aspects of the service were not well-led.

The provider had systems in place to monitor the quality of the service but these were not always operating effectively.

The provider and registered manager had a number of systems in place to monitor the delivery of care and support to people using the service.

Requires improvement



Unit 4, Bentinck Court

Detailed findings

Background to this inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection was planned to check whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.’

This inspection took place on 6 May 2015. We gave the providers and registered manager three days’ notice of the inspection to make sure they would be available.

The inspection team consisted of one Inspector.

Before the inspection, we reviewed the information we held about the service. This included information given to us by the providers when they applied for registration.

During the inspection, we spoke with the registered manager and office staff. We looked at the care records for six people using the service and the recruitment records for four care workers. We also reviewed records relating to the management of the service. These included policies and procedures, the record of complaints, staff training and medicines management records.

Following the inspection, we spoke with nine people using the service and family members of four other people who received care and support from the service. We also spoke with five care workers and received comments from the local authority brokerage team and an organisation supporting people to arrange their own care and support, using direct payments.

Is the service safe?

Our findings

People using the service and their relatives told us they felt safe using the service. One person said, “I am 100% safe and 100% satisfied with my carers.” A second person said, “I feel very safe with the carers.” A third person said, “I’ve never felt unsafe, the carers are very good.” Comments from people’s relatives included, “My [relative] is perfectly safe when she’s with the carers;” “We never have to worry, we know [relative] is safe” and “I never worry about [relative’s name’s] safety.”

The provider had a policy and procedures for safeguarding people using the service and they had reviewed these in July 2014.

Records showed care workers had completed training in safeguarding adults as part of their induction and the providers arranged refresher training when required. Care workers told us they found the safeguarding training helpful in understanding what they needed to do if they had concerns about a person using the service. One care worker told us, “The training was very good, I know I have to tell my manager if I have any concerns about possible abuse.” A second care worker said, “If I thought someone was being abused I’d tell someone as soon as the person was safe.” A third care worker said, “If I thought someone was at risk of abuse, I’d make sure they were safe and tell my manager, we have a duty of care.”

Care records included assessments of potential risks to people using the service and care workers. These were

personalised and indicated if people were at risk from certain interventions, such as care workers supporting them to mobilise and potential risks in the person’s home. The assessments included information about how care workers should minimise risks and support people in the safest way. The providers had updated and reviewed the risk assessments as people’s needs changed.

There were enough care workers to provide people with the care and support they needed. The registered manager told us the service deployed teams of two care workers to care for people who needed this level of support. People and their relatives told us the service always provided this, in line with their care plan. One person told us, “We usually have the same two carers but if there is any change, the office always lets us know.” A second person said, “The two carers always arrive together and they know what support I need.”

The providers had systems in place to make sure care workers were suitable to work with people using the service. Staff recruitment files included application forms, references, proof of identity and criminal records checks.

Records showed care workers supported some people with their medicines and people told us they received their medicines safely. The registered manager told us they trained care workers to support people with their medicines and the training records confirmed this. When care workers provided this support to people they recorded the tasks they carried out in a daily diary kept in the person’s home.

Is the service effective?

Our findings

People using the service and their relatives told us they received the care and support they needed. People's comments included, "They go out of their way to help. The carers do everything I need, they're fantastic," "They're lovely, they always try and help with any problems" and "They're absolutely marvellous, I'd recommend them to anyone." A relative commented, "It's a fantastic service, we're very happy." However, another relative told us, "Some of the carers could be better when it comes to cleaning and infection control."

Care workers received the training they needed to work with people using the service. Training records showed all care workers had completed the provider's four-day induction programme and had shadowed more experienced carers before working on their own with people using the service. The records also showed all care workers had completed training the provider considered mandatory, including infection control, safeguarding, food hygiene, basic first aid, fire safety and dementia awareness. The registered manager showed us the agency's system for alerting them when care workers needed refresher training. The records showed all care workers were up to date with their training.

Care workers told us they found the training helpful. Their comments included, "The training has been good, they make sure we're up to date," "The induction was good, very helpful," "The induction and training have been very good. I shadowed more experienced carers when I started" and "The refresher training has been very good."

The provider had a policy on staff supervision and appraisal that they had reviewed in July 2014. Staff records showed care workers met with a senior member of staff to discuss their work with people using the service, their training and development needs. There was no set frequency for these meetings and the provider's policy said this would depend on the care worker's experience and their need for support. All of the care worker files we

reviewed included a record of at least one supervision meeting in the last 6 months and an annual appraisal. The registered manager also told us she saw each care worker every Friday when they came to the office to collect their rota for the following week. The registered manager said this enabled her to meet with individual care workers or small groups to discuss any issues or changes.

Care workers told us they could meet with the provider or registered manager at any time if they needed advice or support. One care worker said, "The manager is very supportive, she knows what she's doing." A second care worker told us, "I can always speak to [provider's names] or [registered manager's name] if I need support. They always make time for you if you need to talk."

The service asked people for their consent and agreement before care workers cared for or supported them. The provider reviewed their consent policy in July 2014 and gave care workers guidance on obtaining consent before they supported people. Care records included a consent form, although the person using the service or their representative had not always signed this. People and their relatives told us care workers always explained the care and support they gave. One person said, "They always tell me what they're going to do and ask if I'm ok with that." A relative told us, "The carers always explain what they're doing and my [relative] needs that reassurance."

Where care records showed people needed support to eat and drink, the daily care notes completed by care workers indicated they gave this support. One relative told us, "The girls (care workers) do prepare drinks and snacks and my [relative] has never complained."

People's care records included assessments of their healthcare needs and details of how care workers would ensure they met these. In most cases, people met their own healthcare needs, with support from their relatives, if needed. A relative told us, "My [relative] gets support to go to appointments but only if I can't help, the girls (care workers) are very flexible."

Is the service caring?

Our findings

People using the service and their relatives told us their care workers were kind, respectful and caring. Their comments included, “The carers do everything I need, they’re fantastic,” “They are all really caring people, they’d do anything for you” and “The carers are very kind and caring, nothing is too much trouble for them and they always make sure I’m comfortable before they leave.” Relatives also told us, “They are lovely people, I know they genuinely care about my [relative]” and “They are all very caring people, they’d do anything for you.”

Care workers knew the people they worked with well, including their life histories and their preferences for care. One person told us, “They know all about me and what I like. It’s nice when we have a chat and it’s not all about my health.” People told us that staff always did that little bit extra to help them. Such as household tasks, helping with the washing, or if they ran out of shopping they would pick things up for them between visits. One person told us, “I have never felt so much care in my life.” They went on to say, “My carers are lovely, they do everything I want, they really look after me.”

The registered manager made sure people were happy with the care workers that supported them. People told us they were introduced to new care workers, who often worked alongside care workers the person knew, before working alone.

People received consistent care and support from care workers who understood their needs. Most people told us

they usually had the same regular care workers at the same times each day. People also told us their care workers knew what help they needed and always stayed the right amount of time on each visit. People’s comments included, “The girls (care workers) always stay the right amount of time and do everything I need” and “Any new carers are always introduced to me before they come and help me.” However, one person commented, “It’s fine, but I don’t have regular carers and I’m not always told in advance when they change.” We discussed this person’s experience with the registered manager following the inspection and they told us they would remind all supervisors to make sure people were told about changes to their care workers.

The provider or registered manager discussed people’s care needs with them so they could develop a care plan tailored to their individual needs. The registered manager told us they would then review each person’s care plan at least annually or more frequently, if their needs changed. The provider held a more in depth review with the person twice each year, to ensure their needs were still being met. Care records confirmed these reviews were taking place.

Care workers treated people with dignity and respect. The provider reviewed their privacy and dignity policy in July 2014 and this included guidance for staff on treating people with respect. Care workers told us they had completed training on treating people with dignity and respect and said they had found this helpful. One care worker said, “We must always remember to treat people with respect, we’re in their home.”

Is the service responsive?

Our findings

People told us they received care and support that was personalised to their needs. One person commented, “It all works very well, it’s usually the same carers and they know exactly what help I need.” A relative said, “My [relative] always enjoys the time they spend with the carers, they know him very well and treat him as an individual.”

The registered manager told us they, or the provider, met with people to complete a full assessment of their care and support needs, to see if the service could meet these. During this meeting, the manager gained the information needed to understand people’s personal histories, their preferences for care and how they wanted care workers to support them. One person told us, “They talked to me about what I wanted help with and how they could help me.”

Following this meeting, the service developed a care plan to outline how the person’s care workers would care for and support them. The manager and providers then kept in regular contact with the person to make sure they were happy with the care they received and their needs had not changed.

If people’s needs changed and they needed additional support, the registered manager worked with community services to ensure people received the support they required. For example, the registered manager told us one person’s care needs had increased and they had worked with health services and the local authority to review and increase the level of support they received. Care records confirmed the service was responsive to people’s changing needs.

Staff supported people to follow their hobbies and interests. A relative told us, “It’s up to my [relative] what they do, the care workers know what he likes and they make sure that’s what they do, it works really well.”

The provider reviewed their complaints procedure in July 2014. The procedure provided people with contact numbers to call if they were concerned about their care and these included the local authority, the Care Quality Commission, the police and local government ombudsman. Records showed the registered manager had received one formal complaint. They had dealt with this in line with the service’s procedures, had liaised with the local authority and recorded the actions they had taken. At the time of this inspection, the complaint was still being investigated by the local authority and the outcome was not known.

Most people told us they did not have any complaints about the care and support they received but all said if they did, they would speak with the manager. Their comments included, “I’ve never needed to make a complaint. I did talk to the manager about a couple of small things and they sorted them out” and “They did tell me how to complain, but I’ve never needed to.” One person did say they had made a complaint and commented, “We did make a complaint about a carer a while ago and it was dealt with straight away.”

Care workers knew how to support people in making a complaint should they wish to make one. One care worker told us, “We’ve got a procedure to follow and I would always encourage my clients to use it if they had any complaints.”

Is the service well-led?

Our findings

The provider had systems in place to monitor the quality of the service but these were not always operating effectively. For example, the provider's audits of care records had not identified that people using the service or their representatives had not always signed their care plans. Some care plans were also overdue for review or were not dated and it was not possible to establish if they were up to date. The provider's audits had not identified errors in people's medicines records. Care workers returned Medicines Administration Record (MAR) sheets to the office at the end of each month for archiving and storage. We reviewed the MAR sheets for seven people and found gaps in the records for six people. Although care workers had written in the person's daily care notes that they had received their medicines, they had not recorded this on the MAR sheet, in line with the provider's policy. Therefore, these records did not provide an accurate picture of the care and support people received. In two cases, care workers had not dated the MAR sheet and it was not possible to cross-check with the person's daily care notes to evidence they had received their medicines.

These were breaches of regulation 17 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

The service had a registered manager. People were very complimentary of the manager and the service. One person told us, "The manager is very good, very easy to talk to." Another person told us, "The manager or the providers ring to check everything is working well for me. They're very good" Social care professionals commented positively on the way the service was run. They told us, "We get very positive feedback from clients who have used the agency" and "It's a positive service, the manager is very flexible and will always help if she can."

Staff knew how to treat people's information confidentially. Care records were kept in people's homes, with their agreement. Care workers took daily care notes and medicines records to the main office regularly and these were stored in lockable filing cabinets.

The providers and registered manager had systems to assess and monitor the quality of the service. These included spot checks on people's care to monitor the support they received. The registered manager was committed to the delivery of a high standard of care to people and they used the quality monitoring processes to keep the service under review and to drive any improvements. They ensured each person using the service had at least one annual quality audit, in line with the provider's quality policy and records confirmed this happened. Where quality reviews identified changes were needed to a person's care package, the provider and registered manager made these. For example, the registered manager moved one person's call to an hour later in the evening, as they wanted the support to happen as late as possible. Another person's care worker was changed when they told the registered manager they "didn't gel." Although the person did not want to make a complaint about the care worker, the service made the change to ensure the person was happy with the support they received.

Care workers told us they received constructive and motivating feedback from their manager which improved their skills and care delivery. They told us they saw the manager each week and had regular contact by telephone and text messages. Care workers told us they were able to talk with the registered manager or provider about people's care, their own training needs and any changes to the service's policies and procedures.

This section is primarily information for the provider

Action we have told the provider to take

The table below shows where legal requirements were not being met and we have asked the provider to send us a report that says what action they are going to take. We did not take formal enforcement action at this stage. We will check that this action is taken by the provider.

Regulated activity	Regulation
Personal care	<p>Regulation 17 HSCA (RA) Regulations 2014 Good governance</p> <p>The registered person did not monitor effectively the quality and safety of the services provided.</p>