

Prestige Homecare Services Limited

Prestige Homecare Services

Inspection report

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Tel: 02087997507

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18 April 2023

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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

Prestige Homecare Services is a domiciliary care agency providing personal care and support to people in their own homes in the London Boroughs of Ealing and Harrow. At the time of the inspection the agency was supporting 44 people. 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 and what we found

The service met people's care and support needs. People and their relatives spoke positively of their care service and how it was managed. The provider developed and reviewed care and risk management plans with people and their relatives. Staff supported people to receive their medicines as prescribed and medicines were managed safely.

People were usually visited by the same staff who they were familiar with and who knew their needs and how they liked to be supported. The provider's recruitment processes helped to make sure they only employed suitable staff.

Staff received regular training, supervision and competency checks so they could support people appropriately. They felt supported in their roles by the registered manager and office staff.

The provider had systems in place to monitor the quality of the service and make improvements when required. They asked people and staff to give feedback about the service. People and their relatives knew how to raise any issues and found staff approachable and responsive. The service worked in partnership with other services to provide people with joined up care.

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 overall (published 19 April 2022), although we found improvements were required in ensuring people were supported safely. At this inspection we found improvements had been made.

Why we inspected

We carried out an unannounced focused inspection on 18 March 2022 and found improvements were required. This inspection was prompted by a review of the information we held about this service and we undertook this focused inspection to confirm improvements had been made. This report only covers our findings in relation to the key questions Safe and Well-led. 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 remained 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 Prestige Homecare Services on our website at www.cqc.org.uk.

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.

Prestige Homecare Services

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 conducted by 1 inspector and 1 Expert by Experience. 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 and specialist housing.

Registered Manager

This provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations.

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

Notice of inspection

We gave the service 24 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 11 April and ended on 26 April 2023. We visited the location's office/service on 18 April 2023.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. We used the

information the provider sent us in the provider information return (PIR). This is information providers are required to send us annually with key information about their service, what they do well, and improvements they plan to make. We used all this information to plan our inspection.

During the inspection

We spoke with 4 people who used the service and 9 relatives. We spoke with 3 care staff and 2 professionals who have worked with the service recently. During our inspection visit we spoke with the registered manager, a care coordinator, an administrator, a care quality consultant working for the provider and the nominated individual. The nominated individual is responsible for supervising the management of the service on behalf of the provider. We looked at a range of care records, including 4 people's care and risk management plans, 3 staff recruitment files, and a variety of records relating to medicines support and the management of the service.

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.

Preventing and controlling infection

- There were appropriate arrangements in place for preventing and controlling infection.
- The provider supplied staff with personal protective equipment (PPE) so they could support people safely. Staff told us they had sufficient supplies of this.
- Staff had completed training on infection prevention and control and using their PPE. The provider checked staff used this appropriately.
- The registered manager had arrangements in place for responding effectively to risks and signs of infection and supporting people or staff in the event of someone becoming ill due to an infection, such as from COVID-19.
- We were assured that the provider's infection prevention and control policy was up to date.

Assessing risk, safety monitoring and management

- The provider had processes in place to assess and support people to manage risks to their safety and well-being. People and relatives told us they felt safe with staff and their care.
- People's care and risk management plans considered assorted issues such as people's health and medicines needs, mobility support and the equipment they used, and a person's home environment. Plans set out actions to mitigate these risks and the registered manager ensured these were reviewed regularly. There was guidance for staff about people's health conditions, such as living with epilepsy, and how to recognise and respond if a person became unwell.
- Staff said they found care and risk management plans useful. They commented, "[The plans] are helpful to understand how to support the person" and "Very helpful, I can see the care plan get an idea of what you can do for [the person]."
- The registered manager had business continuity plans in place to ensure service provision in the event of an emergency.

Staffing and recruitment

- People and their relatives gave mostly positive feedback about the timeliness of their care visits. Most people said care staff came on time and the provider contacted them if staff were running late. One person told us, "Mainly when there is a change of carer it can be hit and miss."
- We saw the provider monitored staff attendance, recorded instances when staff were late, why and actions taken in response to these, including information statutory services. For example, when staff had public transport difficulties. Care coordinators rostered staff to visit people near to them so as to minimise staff travel times. People and relatives said the service also contacted them to check staff were arriving on time.

- Records of daily care showed people were usually visited by the same staff at regular times. This provided people with continuity of care. A relative said, "It's been lovely to have the same carer, they try to keep to the same person."
- Staff received regular training, supervision and competency checks so they could support people appropriately. Staff told us they felt supported in their roles by the registered manager.
- The provider followed appropriate recruitment processes with new staff to make sure they only offered roles to fit and proper applicants. This included establishing their employment history and completing Disclosure and Barring Service checks. These provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.

Using medicines safely

- There were appropriate systems in place to ensure people took their prescribed medicine. People and relatives told us they were happy with this support.
- Staff had completed safe medicines support training and the registered manager ensured staff were assessed as competent to provide this.
- People's care plans set out their medicines support needs and the provider had risk assessed this activity. There was clear guidance for staff on how to support people to take 'when required' medicines, such as for pain relief.
- Staff used medicines administration records (MARs) to document when they had supported a person to take their prescribed medicines and we saw these had been completed appropriately. Office staff audited MARs on a monthly basis and records of these checks were detailed, noting any issues found and actions taken to address them.

Learning lessons when things go wrong

- There were systems in place for responding to incidents and accidents and learning from these.
- The registered manager ensured staff recorded what took place and the actions taken to ensure people were safe. This included informing people's families and other agencies and following up with the person to check on them later. For example, when staff arrived at a person's home to find they had experienced a fall. Relatives also told us this happened.
- The service recorded actions taken to reduce the risk of incidents re-occurring, such as reviewing people's mobility or environmental risk assessments and implementing findings from these.
- The registered manager reviewed incidents and accidents regularly to identify lessons and improvement actions for the service.

Systems and processes to safeguard people from the risk of abuse

- There were effective processes in place to protect people from harm and the risk of abuse, although there had been no such concerns since our last inspection.
- The registered manager and staff understood how to respond to safeguarding concerns. Staff completed training on recognising and reporting abuse. Staff we spoke with knew how to do this, including using whistleblowing, and felt confident the registered manager would listen to any concerns they raised.

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.

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

- The registered manager fostered a positive culture focused on providing good care to people. A member of staff said, "[The registered manager] is a source of advice from the whole team, believes in teamwork, and encourages you."
- People and relatives told us staff provided care that met their needs. Numerous people told us, "[Care staff] do what they are supposed to." A person told us, "They are very caring people." A relative commented, "They talk to [the person] the explain things and [the person] is always happy when they are here." Another relative said their family member "can have a laugh with [the care staff] and talks to them without hesitation."
- Staff said they liked working for the provider and were motivated. One staff member, "When [people] are happy, it gives me a sense of pride."
- People's care plans were personalised and promoted treating people with dignity and respect.

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

- There were assorted quality assurance systems in place to monitor the safety and effectiveness of the service. These included regular audits of medicines support, checks on records of people's daily care and regular telephone calls to people and their families. The provider used these calls to assess people's satisfaction with the service and we saw people consistently rated their care experiences positively. When people had raised an issue, staff recorded the actions taken to address this.
- Supervisors visited people's homes to conduct and records observations of staff providing care. People and staff also confirmed these checks to place and staff said they found them helpful.
- The registered manager used the assurance systems to identify opportunities for learning and developing the service. For example, they had reviewed and improved a checklist of actions to be completed in the event of staff not being able to enter a person's home. We saw the registered manager reviewed and approved the checklist each time this occurred so as to ensure people were safe.
- The registered manager held monthly meetings with the service director and care coordinators to discuss the governance of the service and improvement initiatives.

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 had systems in place for responding and apologising to people when things went wrong.

People told us the provider responded promptly when they had raised an issue or complaint. One family member said, "They sorted it out straight away, they really showed concern."

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

- People, relatives and staff were involved in people's care and the service.
- Staff involved people and their families in assessing, planning and reviewing people's care.
- The provider sent people and relatives periodic surveys so they could provide further feedback about the service. An evaluation of a survey conducted since our last inspection showed people rated their care favourably. The registered manager had acted on any reports of dissatisfaction.
- People and relatives said they could contact the provider's office when they needed to. Their comments included, "They always pick up, they are very friendly", "They are lovely and we have a good relationship" and "They are very helpful and polite."
- The registered manager held regular team meetings to discuss the running of the service, giving staff opportunities to provide feedback. Recent records of these indicated the provider had planned to conduct a staff survey shortly after our visit.
- Care staff told us they felt listened to and supported by the office-based staff, their colleagues and the registered manager.

Working in partnership with others

- The service worked in partnership with other health and social care agencies, such as social workers and healthcare professionals. This helped people to receive joined-up care to meet their needs. A professional told us, "Their communication is very good, giving me feedback on a weekly basis."