

Pearlfect limited

Pearlfect Limited

Inspection report

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Date of inspection visit:
12 June 2018
19 June 2018
22 June 2018

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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?

Good ●

Summary of findings

Overall summary

The inspection took place over several dates. On the 12 June 2018 we visited the office. On the 19 June 2018 we visited people in their own homes and on 22 June 2018 we telephoned people who used the service to get their feedback about their experience of the service. We gave the provider 48 hours' notice of our intended inspection to make sure that appropriate staff were available to assist us with the inspection.

At the time of our inspection four people was being supported by the service. This was the first inspection to be carried out since the provider was registered with the Commission in April 2017.

There was a manager in post who had registered with the Care Quality Commission (CQC). A registered manager is a person who has registered with the CQC to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act and associated Regulations about how the service is run.

People are supported to have maximum choice and control of their lives and staff support them in the least restrictive way possible, the policies and systems in the service support this practice.

We spoke with two relatives who told us that their family member was kept safe and was well cared and was supported by staff who were both competent and well trained. Staff had received training in how to safeguard people from potential abuse and knew how to identify the risks associated with abuse.

The provider operated a thorough recruitment processes which helped to ensure that staff employed to provide care and support were fit to do so.

There were sufficient numbers of staff available to meet individual needs and the service provided was flexible.

People who used the service and their relatives were very complimentary about the abilities and experience of the staff who provided their care and support.

Staff supported people to stay safe in their home, and were supported to maintain their health and well-being. Staff developed appropriate positive and caring relationships with the people they supported and their family. Feedback from people who used the service was consistently positive and complimentary.

Staff asked for people's consent before providing care and support. People who used the service and their relatives, where appropriate, were involved in the initial planning of the care and support they received. People's personal information was stored securely and confidentiality was maintained.

People who used the service and their relatives told us they felt the staff provided care and support that was delivered in a way that promoted their dignity and respected their privacy. Staff were knowledgeable about

people's preferred routines and delivered care that was individualised.

We were told that staff listened to people and responded to them in a positive way. Relatives knew how to raise concerns if they needed to and told us they were confident that the registered manager would take appropriate action to address any concerns in a timely way.

The registered manager had arrangements in place to seek feedback from people who used the service, their relatives, external stakeholders and staff members about the services provided. There was an effective system in place for people to raise complaints about the service they received.

We found that records were sufficiently maintained and the systems in place to monitor the quality of services provided were effective.

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 consistently safe.

Staff were aware of safeguarding people from potential risk and knew how to report concerns.

Risk assessments were completed and reviewed regularly.

There were sufficient staff with the right skills and experience to meet people`s needs at all times.

Safe recruitment procedures were robust.

People were protected from the risk of infections.

People were reminded and supported to take their medicines and staff had been trained in the safe administration of medicines.

Is the service effective?

Good 

The service was consistently effective.

People received support from staff who had received the necessary training to carry out their role effectively.

Staff felt supported by the registered manager.

People were encouraged to eat a healthy balanced diet.

People were supported when required to attend health care appointments.

Is the service caring?

Good 

The service was caring.

People developed positive relationships with the staff who supported them.

People were involved in making decisions about the support they received.

People were supported to retain their independence.

People were treated with dignity and respect and their privacy was maintained.

Is the service responsive?

Good ●

The service was responsive.

People's care needs were met in a way they liked.

Care plans included the appropriate information to help ensure care was provided in a person centred and safe way.

Where people were supported at the end of their lives, this was done with dignity and kindness.

Complaints were responded to and feedback was sought.

Is the service well-led?

Good ●

The service was consistently well-led.

The service had systems and processes in place to ensure the service operated effectively

There were systems in place to monitor the quality of the support provided and to drive improvement.

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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 12, 19 and 22 June 2018. We told the provider 48 hours before our visit that we would be coming to ensure we could access the information we needed. Before our inspection we reviewed information we held about the service including statutory notifications relating to the service. This included the Provider Information Return (PIR). This is a form that requires them to give some key information about the service, what the service does well and improvements they plan to make.

During the inspection we were unable to observe care provision due to the nature of the service which provided personal care and support to people living in their own homes. However, we did visit people within their homes to discuss the care provided and view documentation in relation to the service provided. We also contacted people's relatives who gave us feedback about the service. We spoke with two staff members and the provider, who was also the registered manager.

We looked at two care plans, three employment files, medicine records, quality monitoring records and other relevant documents relating to how the service operated.

Is the service safe?

Our findings

People who were supported by the service informed us that they felt safe. One person we visited told us, "I cannot speak highly enough about the care I receive. I have always felt safe and secure which ever carer is coming to help me." One relative told us they considered their family member was very safe at all times. Staff knew the people they supported well and were able to demonstrate they knew how to keep them safe.

Staff we spoke with were able to describe what constituted abuse and how they would report any concerns. They were also clear about who they would report concerns too should the need arise. We saw that information and guidance about how to recognise the signs of potential abuse and report concerns, together with relevant contact numbers, was displayed within the office as a reminder for staff. Staff received safeguarding training when they joined the service and were provided with regular updates when required.

Safe and effective recruitment practices were followed which helped make sure all staff were of good character and suitable for the roles they performed at the service. We checked the recruitment records for three staff members and found that all the required documentation was in place which included two written references and criminal record checks.

There was adequate staff provided with the right abilities and experience to meet the person's needs safely. We spoke with two relatives who both told us they considered that there were enough staff to meet the needs of their family members and they confirmed they had a team of regular support workers. Staff rotas were planned in advance and confirmed there were enough staff to meet people's needs safely. We saw information with regards to 'out of hours' contact numbers to call in the event of the staff member not arriving at the specified times.

There were suitable arrangements in place for the safe administration of medicines and staff had been trained. There were also medicine administration records in use and regular audits had been completed to monitor the safe administration of medicines.

People's safety was promoted as a result of staff's understanding of safe systems of work. These included training on subjects including moving and handling, infection prevention and control and how to turn off any utility power supplies in an emergency. Staff wore protective clothing during people's care and food preparation and this helped to provide people's care as hygienically as possible. This was in addition to infection prevention training and hand wash techniques.

We saw that risk assessments were completed as part of the initial assessment of the person's needs. We found that these had been reviewed regularly to take account of the person's changing needs and circumstances. The registered manager reviewed all risk assessments and ensured regular reviews were completed.

There was a system in place for the recording of accidents and incidents although there had been none since the service had been registered with the Care Quality Commission.

Is the service effective?

Our findings

People's care and support needs were assessed to help determine how these needs would best be met. Examples of needs which had been assessed included those for washing, dressing, medicines administration, moving and handling and health conditions which staff needed to be aware of. This was as well as specialist equipment. People's needs, treatment and choices were supported by staff who treated them equally and no matter how complex their needs were.

People who used the service received support from staff who had the appropriate experience and skills to carry out their roles and responsibilities. Staff completed an extensive induction programme when they started working for the service. This gave new staff the skills, training and knowledge to enable them to support people effectively.

Training records confirmed that staff received a varied training programme and that the training was updated appropriately. Specific training had been provided which ensured that staff had the skills and knowledge to support people.

The registered manager told us training was updated annually. Staff competencies were observed and assessed by the registered manager who often worked alongside staff which provided an opportunity to assess both staff competencies and also to mentor staff to ensure they followed good working practices. We saw records of the recent spot checks carried out on all staff employed by the service which ensured people were cared for and supported effectively and professionally.

One staff member told us that the training they received was appropriate for their roles. They told us, "I had a very thorough induction when I first started; it gave me a good understanding and insight into what the job entailed." We were told by the registered manager that new staff also 'shadowed' more experienced staff until they were competent to work in an unsupervised capacity.

One staff member we spoke told us that they felt fully supported by the registered manager and they had regular contact with them at the office and also within the person's home. The staff member confirmed that they received regular supervisions with the registered manager which gave them the opportunity to discuss work related issues or concerns.

The registered manager and staff we spoke with understood that they were required to obtain people's consent before they provided care and support. They told us that they always asked the person if it was ok to assist them and always respected the person's wishes. For example, the registered manager told us they contacted the person who used the service and their relative to inform them about the inspection taking place and to obtain their consent for us to contact them and obtain feedback. We also saw that a representative of the persons had signed consent forms within their plan of care, when appropriate.

People were supported with their nutritional needs by staff who knew what people's food and drink preferences were. One person said, "The carers always makes sure my breakfast is prepared and ready to

eat before they go and am always left with a hot or cold drink within easy reach." Staff told us they promoted people's choices by prompting them with a selection of meal and drink options. The time of staff care calls were planned to coincide with the times people chose to eat. Where required, staff monitored people's daily food and drink intake to ensure they had sufficient quantities as well as a diet that was appropriate such as one low in sugar.

People who used the service was supported to attended appointments at their GP or other health related professionals. Relatives told us that care staff supported their family members to attend regular appointments in relation to their health and staff worked flexibly around their appointments to ensure they were supported on the days they had to attend hospital appointments.

Is the service caring?

Our findings

Relatives we spoke with told us their family members were looked after in a kind and caring way. They told us their family member had regular staff who they liked and got on well with. Staff knew people well and were familiar with their routines. The person told us, "All my personal care is given in a kind and respectful way and in private." Another relative told us, "The support my [family member] receives is really very good. The staff are really kind and caring and I have no concerns. One person we visited told us, "I can't fault them; they are absolutely fantastic." People and their relatives told us that the staff assisted with daily personal care needs, shopping and when necessary budgeting.

People also told us that staff always preserved their privacy and dignity. One person said, "They [the staff] always treat me with great dignity, respect and kindness." One member of staff said that, "I think Pearlfect is a great company both to work for and also in the way it cares for the people we support."

Staff had developed positive and caring relationship with the people they cared for and demonstrated that they knew about their individual preferences, likes, dislikes and daily routines. One staff member we spoke with was able to tell us how they maintained people's privacy, dignity and independence. We were not able to observe care being delivered but when one staff member spoke with us they talked about the person they supported in a kind, caring and sensitive way.

One relative we spoke with was very positive and complimentary about the staff that provided their family members care. They told us, "They show respect, give choices in selecting what to wear, what to eat and places to go." They went on to tell us, "My carers are fully aware of my needs and capabilities and offer me the utmost attention. My extremities tend to get cold very quickly and the carers will always ensure that I have an extra blanket to cover my hands and feet."

People who used the service was encouraged to maintain positive relationships with friends and family. We were told that staff always kept their families informed of any changes that related to their relative's needs.

People who used the service and their relative told us they had been consulted and involved in their care planning. We saw documented evidence of this within the two care plans we reviewed where both people had signed to confirm they has agreed with its content.

People's private and confidential information was stored securely within the main office and we saw that confidentiality was maintained by the registered manager. The registered manager was aware of how to contact advocacy services for people to use, when required.

Is the service responsive?

Our findings

People who used the service received appropriate care and told us that staff were both responsive and flexible when they provided support to them.

Feedback from the relative of one person who used the service demonstrated that the care provided was responsive to the person's individual likes and changing needs. They told us, "My [family member] has become more fragile since they first joined the agency but rather than this be a problem, the carers have simply embraced it and adapted and adjusted the care they provide to make sure [name] is always comfortable, well cared for and maintains a good quality of life. This is what makes it such a good agency to care for the elderly and the infirm."

Staff had access to personal information which was kept in a folder in the person's home. This contained a copy of their care plan and associated risk assessments. The support plan gave appropriate information and guidance to staff so they could provide care safely and in line with their individual needs. We saw that all care plans were person centred. For example, plans contained detailed information about the person's life, their interest and their preferences and preferred routines. We found that the staff we spoke with had a detailed knowledge and understanding of the person's complex and changing needs. A relative we spoke with told us, "The staff are definitely and most certainly responsive to [name's] needs." Access to personal information which was kept in a folder in the person's home. This contained a copy of their care plan and associated risk assessments. The support plan gave appropriate information and guidance to staff so they could provide care safely and in line with their individual needs. We saw that all care plans were person centred. For example, plans contained detailed information about the person's life, their interest and their preferences and preferred routines.

We found that the staff we spoke with had a detailed knowledge and understanding of the person's complex and changing needs. A relative we spoke with told us, "The staff are definitely and most certainly responsive to [name] needs."

People said they were able to choose the staff that provided their support, their preferred time of care and what was important to them, this included their preference for a male or female staff to be provided. People told us that on the majority of occasions their requests were met. One person said, "The staff are very good and arrive on time and they let me know if they are running late."

Care plans were up to date and continued to be regularly reviewed and highlighted where care and support needs had changed. Staff confirmed that the care plans gave them sufficient information so that they could provide the required care and support. Staff completed daily notes which described the care and support that had been provided and noted any significant events that had occurred. The daily notes were monitored on a regular basis by the registered manager to evaluate care practices and identify areas for improvement and development. Relatives we spoke with confirmed that they were involved in reviews, where appropriate, and provided with an opportunity to comment on the care and support that their family member received. One relative told us, "The registered manager contacts me regularly if there are any changes to [name] care and support."

People had their end of life care wishes recorded as part of their initial assessment when this was appropriate. The registered manager confirmed that where end of life issues arose they would involve with appropriate services which included the person's GP and community nursing team. The service also would liaise with people's families with regard to their family member's end of life wishes.

People who used the service and their relatives confirmed that they were provided with an information pack when they commenced the service which contained information on how to make a complaint. Both relatives we spoke with confirmed that they knew how to make a complaint but had no issues or concerns about the care and support provided by Pearlfect Limited. They also told us that they were in regular contact with the registered manager and would raise any concerns directly with them, if the need arose. One relative stated, "I can always raise any issues and I feel listened to." One person who we visited said, "I can always speak to the registered manager any time."

A staff member told us they would report any concerns raised with them to the registered manager so they could be addressed and resolved quickly and to the satisfaction of person who used the service.

Is the service well-led?

Our findings

The service was well led with robust systems and processes in place that had been established and further developed since the service first registered with the Care Quality Commission. This ensured the service operated effectively and safely. We saw records that related to risks to the person's health and well-being were up to date and had been regularly reviewed. In addition, the provider kept current and consistent records that related to staff who were employed at the service to provide care to the person which ensured staff had the appropriate skills and competencies to carry out their role effectively and safely. We saw several examples of recent audits that had been completed. These included medicine audits, care plans audits and spot check audits in relation to staff competency which ensured staff were competent to carry out their role effectively and safely.

The provider had systems in place to obtain the views of visiting professionals, staff and commissioners and collated this information into an action plan, when required.

We found the service operated in accordance with their statement of purpose which is a document that sets out what the service aims to do and how they will achieve the objectives. The registered manager told us they had invested time and effort in the development and continual improvement of the service they provided. For example, the care and support plan seen demonstrated personalised care provided a high level of detail that enabled staff to provide the necessary support and care in a person-centred way.

We saw that satisfaction surveys had been completed with people who used the service and their relatives and the feedback seen confirmed that everyone was very pleased with the care provided. One person said, "I get visits from the manager to check that I am happy with everything." This demonstrated that the service and its staff monitored people's care and support needs and considered opportunities for improvement. One person commented in the most recent survey, "I think the success of this agency is due to being small and personable and therefore we get a tailor-made service." We found there was an open culture within the service. Staff told us they enjoyed their work and working for the service. Staff told us that they felt the service was well managed and that they were well supported by the registered manager and colleagues.

The relatives and people we visited we spoke with was very complimentary about the registered manager. They considered the service to be managed, "professionally and competently." There were systems in place to formally monitor the quality of the service. The relative of the person who used the service confirmed that the registered manager had regular contact with them to ensure that they were happy with the service. One staff member told us that they considered the registered manager to be both approachable and competent.

The registered manager provided an open and inclusive service to the people they supported, their relatives and outside professionals.