

Paramount Options Ltd

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Inspection report

Suite 615 Crown House
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London
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14 March 2016

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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

This inspection took place on 14 March 2016 and was announced. We gave the provider short notice of the inspection because the location provides a domiciliary and we needed to be sure that someone would be available to assist with the inspection.

We last inspected the service in January 2014 when we found it was meeting all of the standards we inspected.

Paramount Options Ltd is a home care agency providing personal care and support to people in their own homes. When we inspected, the agency was supporting four people with their personal care.

The agency had a manager who was registered with the Care Quality Commission. A registered manager is a person who has registered with the Care Quality Commission 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 2008 and associated Regulations about how the service is run.

Relatives of people using the service told us their family members felt safe with their care workers.

The provider had a policy and procedures for safeguarding people using the service.

Care workers told us they had completed safeguarding adults training and the training records confirmed this.

People were looked after by staff who were trained and knowledgeable about how to meet their needs effectively.

Care workers were able to demonstrate that they knew people's needs well.

Care workers supported people to maintain a healthy and balanced diet.

Care workers respected people's wishes, gave them choices and supported them to be as independent as they could.

People received a reliable service from care workers who knew and understood their needs.

People's support plans covered their care needs and detailed the support their care workers provided on each visit.

People told us that staff listened to them, and gave them time to express their views and preferences about

the way care is delivered.

Relatives of people using the service and care workers told us they felt able to approach the management team and felt valued by them.

The provider and registered manager had systems to monitor the quality of the service that people received and to make improvements.

The provider and registered manager were active in seeking feedback from people with regard to their experiences of the service and used this to drive improvement.

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.

Relatives of people using the service told us their family members felt safe with their care workers.

The provider had a policy and procedures for safeguarding people using the service.

Care workers told us they had completed safeguarding adults training and the training records confirmed this.

Is the service effective?

Good ●

The service was effective.

People were looked after by staff who were trained and knowledgeable about how to meet their needs effectively.

Care workers were able to demonstrate that they knew people's needs well.

Care workers supported people to maintain a healthy and balanced diet.

Is the service caring?

Good ●

The service was caring.

Care workers respected people's wishes and gave them choices.

Care workers supported people to be as independent as they could.

Is the service responsive?

Good ●

The service was responsive.

People received a reliable service from care workers who knew and understood their needs.

People's support plans covered their care needs and detailed the

support their care workers provided on each visit.

Is the service well-led?

Good ●

The service was well led.

Relatives of people using the service and care workers told us they felt able to approach the management team and felt valued by them.

The provider and registered manager had systems to monitor the quality of the service that people received and to make improvements.

The provider and registered manager were active in seeking feedback from people with regard to their experiences of the service and used this to drive improvement.

Paramount Options Ltd

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 14 March 2016 and was announced. We gave the provider short notice of the inspection because the location provides a domiciliary and we needed to be sure that someone would be available to assist with the inspection.

The inspection team comprised one inspector.

Before the inspection, we reviewed the information we held about the provider, including the last inspection report.

During our visit to the service's offices we spoke with the provider, the registered manager and one of the care co-ordinators. We also reviewed care records for two people using the service, including their care plans, risk assessments and daily care notes completed by their care workers. We also looked at other records, including three care workers' employment files, the complaints log, accident and incident reports, training records, policies and procedures.

Following the inspection we were not able to speak with people using the service but we did speak with two people's relatives and three care workers. We also spoke with two local authority care managers who had worked with people using the service.

Is the service safe?

Our findings

Relatives of people using the service told us their family members felt safe with care workers from Paramount Options. Their comments included, "I don't worry about my [family member] when they are with the carers, I know they're safe" and "I have no concerns about my [family member's] safety and I'm sure [provider's name] would look into any concerns I had."

The provider had a policy and procedures for safeguarding people using the service and care workers told us they had access to the information they needed to help keep people safe and take appropriate action if concerns about a person's safety were identified.

Care workers told us they had completed safeguarding adults training and the training records confirmed this. Care workers understood their responsibility to protect people from harm and could describe the different types of abuse that could occur. They were also clear about the actions they should take if they suspected abuse or if an allegation was made. Care workers were aware of how to report any unsafe practice. They told us they would always report any concerns to the registered manager or the provider and they felt confident they would listen to them, take them seriously, and take appropriate action to help keep people safe. One care worker said, "Abuse is never acceptable, I would report immediately if I was worried about someone I worked with." A second care worker said, "I would report any abuse to [provider's name] or [registered manager's name]."

None of the people using the service when we inspected needed support with their medicines. However, the provider had appropriate policies in place and guidance and training for care workers on the safe administration of medicines. People's care plans included clear details regarding medicines and who was responsible for their administration. Where relevant, a medicines risk assessment had been completed to address and minimise any risk. The care plans also contained details of the person's medicines, so that care workers were fully informed. Care workers confirmed they had undertaken training on medicines administration.

We found the provider had recruitment policies and procedures in place that the registered manager followed when employing new members of staff. We checked the recruitment records of three care workers. They all contained an application form and employment history, a minimum of two references, proof of identity and a Disclosure and Barring Service (DBS) check. A DBS check provided information about any criminal convictions a person may have and helped to ensure people employed were of good character and had been assessed as suitable to work at the service. All of the staff we spoke with confirmed they had provided reference checks, attended an interview and had a DBS check completed prior to employment.

We looked at two people's support plans and saw that each plan contained risk assessments that identified the risk and the support required to minimise the risk. We found risk assessments had been evaluated and reviewed regularly to make sure they were current and remained relevant to the individual and their care needs.

The service had a policy and procedure on safeguarding people's finances. We saw that financial transaction records were available to staff so that full and accurate records could be maintained if care workers ever handled a person's money. The provider confirmed that completed transaction sheets were returned to the office for checking. We checked one completed financial transaction record and found receipts were retained for any expenditure and care workers routinely signed each transaction.

Sufficient staff were provided to meet people's needs in a safe manner and staff were deployed safely and appropriately. All of the care workers we spoke with said they were given enough time to travel to people using the service and spend the agreed amount of time supporting them. People's relatives told us care workers never rushed a support visit, were usually punctual and always stayed the allocated amount of time. One relative said, "The carers are usually on time, if they are late, it's the buses and they always ring me."

Is the service effective?

Our findings

People were looked after by staff who were trained and knowledgeable about how to meet their needs effectively. A relative told us, "The [care workers] know what they are doing, they seem to be well trained."

The provider and registered manager supported care workers and had regular supervision, team meetings and an annual appraisal. Staff told us that they could discuss any work related matters in their supervision including topics such as personal development. One care worker said, "I have regular supervision with [provider's name] or [registered manager's name]. It really helps me to understand my job and the people I'm working with."

Care workers told us they received training in various topics relevant to their specific job roles. These included safeguarding, moving and handling and food hygiene. A care worker told us, "The training is very good, very helpful." A second care worker said, "I have completed my mandatory training and it has helped me to work with the people I support."

The Care Certificate is a set of standards for social care and health workers. It is the new minimum standard that should be covered as part of induction training of new care workers. The provider told us one care worker had completed the requirements of the Care Certificate and they planned to extend this training to all new care workers. Care workers also told us they had also had an induction at the commencement of their employment, and received refresher training when it was due. The training records we saw confirmed this.

Care workers were able to demonstrate that they knew people's needs well. People's relatives told us they usually had the same care workers as there was a small team. This ensured continuity of care and relatives told us the care workers had got to know their routines, likes and dislikes.

The Mental Capacity Act 2005 (MCA) provides a legal framework for making particular decisions on behalf of people who may lack the mental capacity to do so for themselves. The Act requires that as far as possible people make their own decisions and are helped to do so when needed. When they lack mental capacity to take particular decisions, any made on their behalf must be in their best interests and as least restrictive as possible. We checked whether the service was working within the principles of the MCA and found that, where the provider felt a person may lack capacity to make a decision, they worked with the local authority and the person's family to ensure they completed assessments and made decisions in the person's best interests.

We saw that people using the service or their relatives had been involved in their care planning and had signed to demonstrate they had given consent to their care plan. Care workers told us that people could withdraw their consent at any time and that they always gave people the option to accept their offer of care or to refuse it they wished. A care worker said, "I'm there to help people in the way they choose. If they don't want the support I must respect that but it is not usually a problem."

Care workers supported people to maintain a healthy and balanced diet. A relative told us, "The carers always make sure [family member's name] has enough to eat and drink." A care worker said, "If it is in the support plan I will prepare meals and I always make sure [person's name] has a drink left for them when I leave." The daily care notes we saw confirmed this.

Is the service caring?

Our findings

One person's relative told us, "The carers are very good, they really do care." Care workers told us they had really developed positive relationships with the people they supported. One care worker told us "I love my job and really enjoy supporting people."

Relatives told us they felt people did not feel rushed or under pressure and that the care staff enabled them to go at their own pace. One relative said a care worker came to support a person who refused the support that was offered. The relative said, "The care worker got on with other things and then [provided the support] later," demonstrating a flexible and person centred approach to care and support.

Care workers told us they treated people "like they would like to be treated themselves". They told us they respected people's wishes and always gave them a choice, whether this was about what clothing they wanted to wear or whether they wanted to have a wash first or to eat their breakfast. The relatives we spoke with and the care records we checked confirmed this.

Care workers told us that they supported people to be as independent as they could and gave people using the service the opportunity to do as much as they could for themselves. For example, one care worker said "I pass [person's name] an item of clothing and they do what they can to put it on, I just support them with what they cannot do." This care worker also told us, "This supports people to retain skills, rather than becoming more dependent on the support."

People's care records showed the provider asked them about their preferences about how their care was delivered and by whom, for example they could request a preference to have a male or female care worker.

Is the service responsive?

Our findings

People received a reliable service from care workers who knew and understood their needs. One relative told us, "We always meet new carers before they start to work with [family member's name]." A second relative told us, "We've had the same carers for some months now. They know my [family member] very well and [family member] enjoys spending time with them."

Care workers could describe how the care they provided was tailored to individual's needs and was always being adapted as the individual support needs changed. For example, one care worker told us, "People's needs change as they get older or when they are ill so I tell the office and they tell social services. Sometimes people need extra support for a while until they are better." When care workers started to work with new people using the service, they told us they had the information they needed to provide safe and appropriate care. One care worker said, "The manager usually gives me a brief introduction to new clients and I can talk to the person or the family to find out the support they need." A second care worker said, "Every client has a support plan in their home and that has all the information I need to support them."

People's support plans covered their personal, social and health care needs and detailed the support their care workers provided on each visit. The support plans were person centred and used 'I' statements to describe the support people needed. For example, one person's summary of care read, "I need prompting with my tablets and regular help with hair washing and dressing." The plan went on to detail how care workers should support and record the care they provided for this person. The care notes we saw showed the person's care was delivered in the ways they preferred.

The support plans were working documents and were adjusted, as people's needs changed, with the involvement of any relevant family and professionals. A relative told us, "The morning visit used to be too late so we talked to [provider's name] and he was very good, excellent. They changed my time and now come regularly at a time that suits me."

The provider told us they reviewed every support plan every three months, or every six months if the person's needs had not changed. In addition there was a monthly check of the care plan with the person using the service, either in person or during a phone call. Records showed the provider completed and recorded these reviews and checks.

People told us that staff listened to them, and gave them time to express their views and preferences about the way care is delivered. Nobody felt rushed by staff. People told us their care workers always stayed for the required time and would not leave until people were satisfied. People appreciated this and told us that staff always asked if anything else was needed before leaving.

People were aware of how to make a complaint and the provider supported and encouraged them to raise any issues that they were not happy about. A relative told us, when the care package began, they were given a "service user's guide", which outlined how the service operated and how to make a comment or complaint. When asked if they had ever needed to make a complaint, they said, "Yes, once or twice at the

beginning, but I could call the office at any time and they would resolve any issues."

We reviewed the provider's complaints records and found they acknowledged, investigated and responded to any concerns within timeframes outlined in the company's policy. Following one complaint, the provider met with the person using the service and their family to discuss their concerns and agree changes to their support package. The records also included a number of compliments and letters of thanks received from people using the service or their families.

Is the service well-led?

Our findings

There was an open culture at the service. Relatives of people using the service and care workers told us they felt able to approach the management team and felt valued by them. The provider said, "We try to give a really personal, one to one service" and told us, "We know all our customers and staff."

A relative told us, "I'm quite happy with the agency and I can always talk to [provider's name] if I need to." A local authority care manager said, "The provider was very responsive and tried to provide the best care at all times." A second care manager told us, "I had a very good experience with Paramount. Communication is very good and they are good at promoting and supporting activities and identifying risks. My client is very happy with the care workers and likes them all."

The service had a set of principles and values that were shared in their guide for clients. These stressed the importance of working with customers to ensure they had the information they needed to make an informed choice about using the service. The service also stated they would work with customers and their family or representatives to discuss the care and support they needed and tailor the care plan to their individual assessed needs.

The provider and registered manager had systems to monitor the quality of the service that people received and to make improvements. They met with people to review their care and monitored staff competency via a system of spot checks. Daily care records were returned to the office monthly. These were checked by the provider, registered manager or senior care worker. The provider completed an internal audit in March 2016 to review record keeping, staff supervision and training and health and safety. As a result of the audit the provider had made a number of recommendations to improve the provision of care and support. These included, ensuring clients signed the daily log or care workers indicated the client didn't wish to sign, contacting the local authority to access appropriate training for care workers and reviewing daily care notes to ensure care workers recorded the care they provided in a respectful way. The provider told us, "The recommendations and timescales were discussed with the registered manager who has agreed to facilitate the recommendations and seek other options that could improve the quality of the service."

One care worker said, "The (provider and registered manager's names) are really understanding, everything runs smoothly here." A second care worker told us, "It's a good agency, they know everybody and are very supportive."

The provider and registered manager were active in seeking feedback from people with regard to their experiences of the service and used this to drive improvement. This was done through the process of care reviews and annual feedback questionnaires. In 2015, the provider received two responses from people using the service and/or their representatives. Both of the respondents were positive and people said their care workers treated them with respect. Following receipt of the surveys, the provider told us they met with both people to discuss the support they received and any changes they felt could improve the service.

The provider and registered manager engaged positively with our inspection visit. They told us the service

was a member of the United Kingdom Homecare Association Ltd (UKHCA) and had signed their Code of Practice. UKHCA is a professional association that aims to support businesses and promote good practice in the sector. The provider said they were able to keep up with developments in practice through attending UKHCA events and through their regular newsletters. The provider also told us they belonged to the Recruitment and Employment Confederation (REC) and were able to obtain advice and support from this organisation, when required.