

Pacific Care Solutions Limited

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Inspection report

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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

About the service

Pacific Care Solutions Limited is a domiciliary care agency located in the London Borough of Redbridge. It is registered to provide personal care to people aged 18 and over in their own homes, some of whom may have dementia, mental health or physical disabilities. At the time of the inspection, 2 people were using the service.

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

People told us the service was safe. There were systems to protect people from the risk of abuse. Risks relating to people's health, mobility and home environment were assessed so that staff could provide safe care. Staff were recruited appropriately and they received training to provide them with the skills and qualifications to support people. People told us staff were punctual and completed their tasks. People did not require support to take their medicines but medicine procedures were available for when people needed this support.

Procedures for reporting incidents and accidents in the service included learning lessons from them to prevent re-occurrence. Infection control procedures were in place to protect people and staff from the risk of acquiring an infection.

Assessments of people's needs were carried out before they started using the service. People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible and in their best interests; the policies and systems in the service supported this practice. Staff supported people to maintain their independence.

Details of health professionals involved in people's care were included in their care plans. People were supported with food and drink to help them maintain their health. People told us staff were caring, kind and friendly. Staff respected people's privacy and dignity. People's equality and diversity characteristics were understood. People and their relatives were able to express their views about the service.

The provider promoted a positive culture and person-centred service. Care plans recorded people's needs and preferences. People's communication needs were assessed and met by staff. There was a procedure for complaints to be investigated and responded to. Feedback about the service was received from people and relatives. There were quality assurance systems in place for the provider to continuously improve the service.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk

Rating at last inspection

This service was registered with us on 20 December 2022 and this is the first inspection.

Why we inspected

The inspection was prompted by a review of information we held about the service.

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?

The service was safe.

Details are in our safe findings below.

Good ●

Is the service effective?

The service was effective.

Details are in our effective findings below.

Good ●

Is the service caring?

The service was caring.

Details are in our caring findings below.

Good ●

Is the service responsive?

The service was responsive.

Details are in our responsive findings below.

Good ●

Is the service well-led?

The service was well-led.

Details are in our well-led findings below.

Good ●

Pacific Care Solutions Limited

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 carried out by 1 inspector.

Service and service type

Pacific Care Solutions is a domiciliary care agency. It provides personal care to people living in their own houses and flats.

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

The inspection was announced. We gave the service 24 hours' notice of the inspection. This was because we needed to be sure that the provider or registered manager would be in the office to support the inspection. Inspection activity started on 27 April 2023 and ended on 3 May 2023. We visited the office location on 27 April 2023.

What we did before the inspection

We reviewed the information we already held about the service. This included notifications. A notification is information about important events, which the provider is required to tell us about by law. The provider was not asked to complete a Provider Information Return (PIR) prior to this inspection. A PIR is information providers send us to give some key information about the service, what the service does well and improvements they plan to make. We used all of this information to plan our inspection.

During the inspection

We spoke with the registered manager and the director and provider of the service. We spoke with 2 people who used the service, and 1 member of staff by telephone. We reviewed documents and records that related to people's care and the management of the service. We reviewed 2 people's care plans and risk assessments. We looked at other documents such as infection control, staff recruitment and training records.

Is the service safe?

Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm.

This is the first inspection of this registered service. This key question has been rated good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People were protected from the risk of abuse. The provider had a safeguarding policy and procedure on how to identify and report concerns of abuse and who to inform, such as the local authority safeguarding team or police.
- Staff told us they understood the procedures and could describe different types of abuse. Records showed they had received training in this area. People told us they felt safe using the service. A person told us, "I absolutely feel very safe. The carer is very nice."

Assessing risk, safety monitoring and management

- Risks to people's health and risks relating to their personal care needs were assessed and monitored. This ensured staff could provide safe care to people.
- Risk assessments included people's communication needs, skin care, eating and drinking, continence, mobility, physical health, safeguarding, environmental and night time risks.
- Risk assessments were reviewed when people's needs changed. Staff told us the information in risk assessments was helpful in making sure people received safe care. A staff member said, "The risk assessment was helpful and easy to follow."

Staffing and recruitment

- There were enough staff to support people.
- People told us staff were reliable and arrived on time or at times that were suitable. A person said, "The carer always comes on time. The service is very good, very reliable." Staff logged in to calls using a phone application to confirm the times they arrived and left people's homes. People told us staff completed their required tasks and stayed for the correct length of time.
- Staff were recruited appropriately and safely. The provider requested and received references for new staff, proof of identification, a record of their employment history and proof of their legal right to work in the UK.
- Disclosure and Barring Service checks were carried out on successful applicants before they commenced working at the service. This information informs employers of any past criminal convictions of applicants and helps them assess the suitability of staff they employ to support people in their own homes.

Using medicines safely

- People were not required to be supported with their medicines. The provider had procedures for the management of medicines for staff to follow should this be needed in future.
- A medicines administration record (MAR) was in place where staff would document when a person had

taken their medicines.

- Records showed staff received training in medicines administration. Staff told us they had previous experience of supporting people with medicines and were confident about doing so in future while working in the service.

Preventing and controlling infection

- People and staff were protected from the risk of infection. An infection prevention and control policy was in place to help ensure good practice was followed around hygiene and wearing equipment.
- Staff were provided with Personal Protective Equipment (PPE) when visiting people and carrying out personal care. These included gloves, face masks, aprons and shoe covers. The registered manager told us they were able to ensure a full supply of PPE at all times for staff to use.
- People told us staff always washed their hands and wore PPE when they were being supported by them.

Learning lessons when things go wrong

- The provider had a procedure for reporting incidents or accidents or other instances when things went wrong in the service. These included recording the details of the incident, such as an injury to a person, and what action was taken to keep the person safe.
- Forms and procedures showed lessons would be learned to avoid a repeat of the incident in future.
- Records showed there had not been any incidents in the service since the provider first started supporting people in the community.

Is the service effective?

Our findings

Effective – this means we looked for evidence that people's care, treatment and support achieved good outcomes and promoted a good quality of life, based on best available evidence.

This is the first inspection of this newly registered service. This key question has been rated good. This meant people's outcomes were consistently good, and people's feedback confirmed this.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law;

- People's needs were assessed and risks identified to determine if they could be supported by staff with their personal care needs. The registered manager carried out the assessment before people started using the service.
- People told us they were involved in the assessment process and they could express how they wished to be supported. The information was put together so that a care plan could be developed to meet people's needs.

Staff support: induction, training, skills and experience

- A training and induction programme was available for all staff to ensure they were provided the skills and knowledge to support people. People told us staff were knowledgeable and professional in the way they went about supporting them. A person said, "Staff were excellent. They know what they are doing and very competent."
- Records showed staff completed an induction and training after they were recruited to ensure they had the right skills and knowledge. A staff member told us, "I received really good training before I started working."
- Training courses covered safeguarding adults, basic life support, moving and handling, infection prevention and control, and dementia awareness. The training combined online courses and practical face to face training with the registered manager. Records showed the registered manager had the necessary qualifications to deliver professional training to staff.
- Staff also completed the Care Certificate which is a national set of 15 standards health and social care worker work towards.
- Staff told us they felt supported in their roles by the registered manager. Procedures to ensure they had opportunities to discuss their work, their performance and any concerns in supervision meetings, were in place. A staff member said, "I think the company is very good. They have been encouraging and helpful."

Supporting people to live healthier lives, access healthcare services and support; working with other agencies

- People were supported to access healthcare services to maintain their health and receive the treatment they needed. Contact details of the relevant professionals involved in people's care were available in their care plans.
- Staff told us they could identify if people were not well and knew what action to take in an emergency. An on-call 'out of hours' system was in place and the registered manager was on standby should there be an emergency.

Supporting people to eat and drink enough to maintain a balanced diet

- If required, people were supported with food and drink to maintain their health and a balanced diet. A person said, "Yes I am supported by the staff. They provide me with my breakfast and help me prepare things in the kitchen."
- Staff told us they understood people's needs and their preferences for their food and drink. Information about how staff should support people to maintain and manage people's nutritional requirements were included in their care plan.

Ensuring consent to care and treatment in line with law and guidance

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.

People can only be deprived of their liberty to receive care and treatment when this is in their best interests and legally authorised under the MCA. When people receive care and treatment in their own homes an application must be made to the Court of Protection for them to authorise people to be deprived of their liberty.

We checked whether the service was working within the principles of the MCA.

- The provider ensured the principles of the MCA were followed and people's ability to consent to decisions made about their care, were assessed and recorded.
- Staff received training in the MCA and told us they asked people's permission before providing them with support and received their consent. A staff member said, "I ask my client's permission to help them with their personal care. I give them choices about what they want and respect their decision."

Is the service caring?

Our findings

Caring – this means we looked for evidence that the service involved people and treated them with compassion, kindness, dignity and respect.

This is the first inspection of this newly registered service. This key question has been rated good. This meant people were supported and treated with dignity and respect; and involved as partners in their care.

Ensuring people are well treated and supported; equality and diversity

- People told us they were well treated by staff and their needs were understood. People told us staff were kind and caring towards them. A person said, "[Staff] are lovely, really nice. Polite and respectful."
- Staff told us they spent time with people and got to know them. A staff member said, "I have got to know the service users well and we speak all the time. I know what work I need to do and how to support people carefully and respectfully."
- The provider had an equality and diversity policy to ensure people's protected equality characteristics, such as their ethnicity, sexuality, gender and religious beliefs were understood and respected by staff. These were recorded in people's care plans, such as how people wished to practice their religion.
- Staff told us they understood equality and diversity, the importance of respecting people's human rights and challenging discrimination. A staff member said, "I know about equality and diversity. I respect all people and treat them with respect."

Respecting and promoting people's privacy, dignity and independence

- There was a confidentiality procedure in place to ensure people's personal information was stored securely. Staff told us they did not share people's personal details with others in a non-professional capacity.
- Staff told us they ensured people privacy was protected during personal care to maintain their dignity. A staff member said, "I close the curtain and door when giving personal care to people." People told us staff were respectful of their privacy and dignity. A person said, "[Staff] always give me privacy when I need it. They help me with some things but they respect my privacy."
- Care plans contained information about people's levels of independence and if support was required from family members and from staff. For example, their ability to dress themselves and eat independently. One person said, "I have my independence and can do things for myself. It's great to have carers to support me when I need them."

Supporting people to express their views and be involved in making decisions about their care

- Records showed people were assessed as having capacity to express their views and make decisions for themselves. They told us staff and managers listened to their views on how they wished to be supported. Staff told us they respected people's preferences and wishes at all times.
- Records showed people had consented to receive care from the provider and they had been involved in the planning of their care. A person said, "I was involved in everything and could explain what support I wanted. The company were very helpful and supportive. I felt listened to."

Is the service responsive?

Our findings

Responsive – this means we looked for evidence that the service met people's needs.

This is the first inspection of this newly registered service. This key question has been rated good. This meant people's needs were met through good organisation and delivery.

Planning personalised care to ensure people have choice and control and to meet their needs and preferences

- People's care was planned in accordance their wishes, routines and personal preferences. This ensured they received care that was person-centred and had choice and control of how they wished to receive care. A person told us, "I can't complain, the service has been excellent. The company knows how to provide good care. They respond to everything."
- Care plans were personalised and contained information about what support people wanted, when they wanted it and what was important to them. There was also information about their hobbies and interests. For example, a person expressed their interest in bowling and playing with friends and wanting to stay close to their family.
- Staff told us some of the information helped them get to know people. However, we discussed the level of detail in some care plans as some of the information was brief. The registered manager told us this was due to people's preferences around disclosing personal information. The director said as the service grew they would develop care plans so they contained more detail about people's backgrounds, choices and aspirations.
- Staff completed daily records which were notes to confirm the tasks they completed and how the person was in respect of their general health and wellbeing.
- The registered manager told us care plans were reviewed as and when necessary, such as when people's needs changed.

Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities that are socially and culturally relevant to them.

- The provider supported people to develop and maintain relationships with others, such as their family and friends. This helped to prevent people feeling isolated or lonely.
- People were supported to go about their daily lives as much as possible by the service. Staff supported them to follow interests that were relevant to them, such as going to local shops.

Meeting people's communication needs

Since 2016 onwards all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard (AIS). The standard was introduced to make sure people are given information in a way they can understand. The standard applies to all people with a disability, impairment or sensory loss and in some circumstances to their carers.

- People's communication needs were set out in their care and support plans. Staff told us they followed the person's communication plan. For example, a person's communication needs in their care plan stated, "I want care staff to come near me and speak with me as I am hard of hearing."

- The provider confirmed they could provide information about the service in a format that was suitable for people to understand, such as easy read or large print formats of documents.

Improving care quality in response to complaints or concerns

- A complaints procedure was available should people wish to make a complaint about the service. There had been no complaints since the provider registered the service with the CQC.
- The registered manager told us they would investigate complaints according to the complaints policy and provide people and relatives with an outcome for their complaint.
- Records showed people and relatives were able to contact the service if they had any concerns or a query. A person said, "I can contact the office and speak with the manager. They always help."

End of Life care and support

- At the time of inspection the service did not support people with end of life care.
- There was an end of life policy in place should the service support people needing this care and support. However, people's care plans contained some reference to people's wishes should they need this support.
- Staff were provided training so they had the necessary skills and knowledge to support people requiring palliative or end of life care in future.

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.

This is the first inspection of this newly registered service. This key question has been rated good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

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

- The registered manager and staff told us they were clear about their roles and responsibilities to provide a safe service to people.
- Quality assurance systems were in place to monitor the service and implement continuous improvements. For example, the registered manager carried out in person spot checks of staff to make sure they were supporting people safely and followed procedures correctly.
- The registered manager and director continuously checked care plans, staff training, recruitment files and daily notes to make sure they were accurate and completed appropriately. The provider had implemented electronic systems to help manage the service efficiently and effectively.
- If concerns were identified with staff performance or record keeping, the registered manager told us these would be addressed in supervision meetings.
- Daily notes were completed after staff had supported a person. We found them to be clear and detailed.

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

- There was a positive culture in the service. People and staff felt the service was well managed. A person told us, "I would recommend the service. The staff and managers are so caring and approachable."
- Staff told us there was an open-door policy and could approach the registered manager with any issues. A staff member said, "A staff member said, "[Registered manager] is very friendly and always available. I am very happy with everything. The director is also very nice."
- The registered manager was supported by the director and provider of the service. They said, "[Director] is very supportive, we work well together and hope to get more care packages." The director told us, "[Registered manager] is really experienced and I have learned a lot from them. She is very caring and passionate."

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 was aware of their legal responsibility to notify the Care Quality Commission of any allegations of abuse, serious injuries or incidents involving the police.
- They were open and honest with people when things went wrong. The registered manager told us they would continuously make improvements to prevent future reoccurrence.

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

- People confirmed they were contacted by the service to check how they were and if they had any issues.
- The registered manager carried out visits or telephone calls to people to obtain their overall feedback about the service. We saw that feedback was positive. A comment from a person was, "I am very pleased with the service. Always on time, very pleasant and efficient. They are totally reliable."
- Staff told us they felt engaged and involved with the management team. They understood their roles and the policies and procedures for the service to ensure they provided care to a good standard.
- Staff meetings were held to share important information. Items discussed included staff training, recruitment and policies.
- People were consulted about their equality characteristics and these were recorded in their care plans.

Working in partnership with others;

- The provider worked well and in partnership with health and social care professionals such as social workers and local commissioners.
- The provider followed changing national guidance and legislation to ensure policies and procedures for the service were current and up to date.
- The registered manager was experienced in health and social care and was a member of various accredited organisations to help deliver a good standard of training to staff and follow best practice for care.