

PCS (Personal Care Services) Limited

# PCS (Personal Care Services) Ltd

## 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

PCS (Personal Care Services) Limited is a domiciliary care agency that provides care and support to people in their own homes. At the time of the inspection there were approximately 125 people who used the service. The agency provided personal care to people with a range of care needs, which included older people, people living with dementia, people with physical disabilities and people at the end of life.

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 practices adopted by PCS and the opportunities made available to those who used the service clearly had a positive and encouraging impact on their physical, social and emotional well-being. This was confirmed by everyone we spoke with and was evidenced through our observations and reviewing of records.

People were safe using the services of PCS. The practices adopted protected people from harm. The staff team was consistent and the support provided to people promoted continuity of care. Robust recruitment practices were in place. Potential risks were handled well and medicines were managed safely. People were clearly relaxed in the company of staff and relatives confirmed they felt people were safe whilst support from the staff of PCS was being delivered.

An extensive range of training had been provided for the staff team, which helped to ensure people received the care and support they needed. Community health and social care professionals had been involved in the care and support of those who used the service and where appropriate people's dietary needs were fully met.

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

People received good care and support. Their preferences and wishes were respected by the staff team. People were treated with dignity and respect and were involved in the decision-making process. Care files were well written and provided staff with guidance about people's needs. Clear guidance was also available about how to communicate with people effectively and independence was consistently promoted.

The management and staff team were open and transparent during the inspection process. There was evidence of community engagement taking place. A wide range of regular audits and monitoring was evident. We received positive feedback about the manager and the staff team. One person told us, "They [staff] are brilliant. They are smashing. There are no problems whatsoever."

For more details, please see the full report which is on the CQC website at [www.cqc.org.uk](http://www.cqc.org.uk)

#### Rating at last inspection

The last rating for this service was Good (published 20 May 2017).

#### Why we inspected

This was a planned inspection based on the previous rating.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for PCS (Personal Care Services) Ltd on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

Follow up: The service will be re-inspected as per our inspection programme. We will continue to monitor any information we receive about the service. The inspection may be brought forward if any risks are identified.

## 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 ●

# PCS (Personal Care Services) Ltd

## **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 Care Act 2014.

#### Inspection team

The inspection team consisted of two inspectors and an 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.

The service had a manager registered with the Care Quality Commission. This means that they and the provider are legally responsible for how the service is run and for the quality and safety of the care provided.

#### Notice of inspection

We gave the service 48 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 21 November 2019 and ended on 21 November 2019. We visited the office location on 21 November 2019.

#### What we did before the inspection

Prior to our inspection we checked all the information we held about the service. This included any

notifications the service is required to send to us by law, any allegations of abuse or feedback about the service. We used the information the provider sent us in the provider information return. This is information providers are required to send us with key information about their service, what they do well, and improvements they plan to make. This information helps support our inspections.

During the inspection

To understand people's experiences, we spoke with ten people, including those who used the service and their relatives and six members of staff, including the registered manager. We looked at several records. These included two care files, medication administration records, two staff files, training records and associated documentation relating to the operation and management of the service.

We used all this information to plan our inspection.

# Is the service safe?

## Our findings

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

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- The provider had implemented very detailed policies, which helped to ensure people who used the service were protected from the risk of abuse.
- The provider had implemented systems to ensure any allegations of abuse were recorded and properly reported, with clear investigations being conducted and action taken, as appropriate.
- People we spoke with and their families felt they were safe using the services of PCS.
- The workforce had received training in safeguarding vulnerable people and staff members we spoke with were fully aware of safeguarding processes and whistle-blowing procedures.

Assessing risk, safety monitoring and management; Learning lessons when things go wrong

- The provider had developed systems to ensure people who used the service were kept safe from harm.
- Any potential risks had been assessed and strategies implemented to reduce the level of risk.
- Incidents and accidents were well recorded and actions taken supported lesson learned.
- Staff we spoke with were fully aware of the importance of keeping people safe and knew what to do should they be concerned about someone's safety.
- When people were asked about carers arriving on time, one person told us, "They [staff] are better at time keeping than me. They come 15 minutes early and are never late. I can't fault them. If I am late home they will stay until I get there." Another commented, "They [staff] were only late when the weather was awful. They phoned up to say the roads were grid locked and the carer would be late."

Staffing and recruitment

- People who used the service were supported by a consistent staff team, who were fit to work with vulnerable individuals.
- The turn-over of staff was low and therefore continuity of care was promoted. People told us that usually the same staff members visited them and there was no evidence of any missed calls.
- Safe recruitment practices had been adopted by the service and clear disciplinary procedures were in place.

Using medicines safely

- The provider had systems and processes in place to ensure medicines were managed safely.
- Medicines were administered in accordance with instructions by a medical professional, local policies and NICE guidance (The National Institute for Health and Care Excellence.) This is an independent organisation set up by the Government in 1999, which provides guidance about drugs and treatments available on the NHS England.

- Medicine Administration Records were clear and well maintained.
- Staff members responsible for the administration of medicines had received relevant training. They were periodically competency assessed and their medication knowledge was checked from time to time to ensure they remained safe to manage medicines.

#### Preventing and controlling infection

- The provider had systems in place, which helped the staff team to maintain good infection control practices.
- Personal Protective Equipment, such as disposable gloves and gowns were available for staff use, as was needed.
- The staff team had completed training in infection control and clear guidance was available about how to prevent cross infection.

# 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.

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. 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

- The provider had systems in place to ensure good outcomes were achieved for those who used the service.
- People's needs were thoroughly assessed before a package of care was arranged and they were supported to experience a good quality of life.
- People and their loved ones were fully involved in the assessment process and in the development of their care plans.
- The staff team effectively ensured people's choices were carefully considered.

Staff support: induction, training, skills and experience

- The provider had ensured the staff team were well trained and had the skills to provide the support required by those in their care.
- Staff personnel files were very well organised, making information easy to find. New employees were provided with a staff hand book and were supported through an in-depth induction programme to help them to effectively fulfil their role.
- The staff team were provided with a wide range of mandatory training, as well as specific learning relevant to their role and to the needs of those who used the service.
- Each staff member was formally supervised and appraised on a regular basis and periodic knowledge checks were conducted. Feedback about individual staff members was sought from those who used the service.

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

- The staff team supported people to maintain a nutritious diet, where appropriate.
- Nutritional risk assessments had been conducted and people were supported with food and fluids, as was required.
- The staff team had completed relevant training in relation to good nutrition.
- The registered manager had displayed in the training room for staff, the importance of good oral hygiene and a detailed policy was in place for this area of care.

Staff working with other agencies to provide consistent, effective, timely care; Supporting people to live healthier lives, access healthcare services and support

- The provider had systems in place to ensure people were supported to access healthcare services in a timely manner.

- It was clear that the service worked well with other health and social care agencies to ensure people received a good standard of care and support.
- Multi-disciplinary team meetings were held with detailed minutes being retained.

#### 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 had systems in place to ensure the service was working within the principals of the MCA.
- People who had capacity to make decisions had given their consent to the care and support provided.
- Mental capacity assessments had been completed and Court of Protection applications had been made, as deemed necessary.
- People were supported to access the services of an independent advocate to ensure decisions were made in their best interests, should they wish to use this facility.
- Plans of care incorporated the decision-making process and these showed that best interest meetings had been held to support people in making decisions.

# 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.

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. 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; respecting equality and diversity

- The provider had systems in place to ensure people were treated equally with any diverse needs being respected.
- We received very positive feedback about the care and support people received. People described their care staff as 'kind', 'caring' and 'respectful'.
- People's individual needs were recorded, along with their likes, dislikes and preferences.

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

Respecting and promoting people's privacy, dignity and independence

- People received good care from a kind and caring staff team. We received very positive feedback about the staff and the management of the service in relation to respecting people and promoting their independence. One person told us, "They [staff] are very good. We have continuation of care, particularly in the morning. We have the same carer most days. We might not have the same person at night, but in general we know them." Another said, "Oh, they [staff] are lovely. They are all well-mannered. The ladies and men all ask if they can do anything else for me."
- People's privacy and dignity was fully considered and staff spoken with were aware of the importance of respecting people as individuals. There was a lot of information displayed in the training room for staff about dignity in care.
- The provider had a range of policies in place to help staff to promote people's privacy and dignity and information relating to advocacy services was available. Advocacy seeks to ensure people can have their voice heard on issues that are important to them.

# Is the service responsive?

## Our findings

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

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. 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

- The provider had systems in place so that guidance was provided for the staff team about people's needs and how these were to be best met.
- Plans of care and risk assessments had been developed, which provided good information for staff. These in were, in general, person-centred. However, some areas could have been more service user focussed and personalised. We discussed this with the registered manager at the time of our inspection, who assured us these would be reviewed.
- People were supported to make choices and were encouraged to make decisions about how they preferred their care to be delivered.

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.

- The provider was meeting the AIS and good use of technology was evident throughout the service.
- The provider had systems in place to enable people to receive information in different formats. This supported those with communication difficulties or those whose first language was not English.
- The staff team were provided with guidance about people's individual communication needs and these were recorded well within the care planning process.
- The provider had systems in place to support one member of staff who had a sensory loss, so they were able to fulfil their duties. This enabled them to experience the same opportunities as all other staff members.

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 registered manager and her staff team clearly supported people to develop and maintain relationships to avoid social isolation.
- A memory folder was available to demonstrate those who used the service were supported to participate in a variety of community activities, such as a trip to Blackpool illuminations, fund-raising events and competitions.
- We observed some lovely events taking place, which were organised by a creative and caring staff team, who were genuinely committed to supporting people to enjoy life and to have fun.

- On the day of our inspection preparations were underway for Christmas festivities. It was lovely to note when a care worker attended a person's home, they contacted the office by phone and the individual and staff member sang a jolly Christmas song on loud speaker for the office staff, who all joined in. This clearly had a positive impact on those who used the service, as they sounded so joyful and happy.
- The registered manager and office staff were busy preparing for a Christmas party in the office restaurant for those who used the service, their relatives and staff members. Individualised Christmas hampers had been made for each person, to be delivered before Christmas. Also, some people who used the service had thoroughly enjoyed participating in a Christmas card competition, the winning product was reproduced and used as the company Christmas card for 2019. The registered manager and staff team had clearly considered ways in which they could maximise enjoyment at Christmas for those who used the service. One person told us, "Once a year they have a party and they even give me a hamper at Christmas time."
- A wide range of other social events were arranged for those who used the service, such as 'glam grans' in a 1940's salon, afternoon tea, local trips and a vintage tea party. One family member told us the carer had found out their relative was an avid reader and so often read to them and now they won't let anyone else read to them.

#### Improving care quality in response to complaints or concerns

- The provider had implemented systems to ensure complaints were well managed.
- People were provided with clear information about how to make a complaint, should they wish to do so.
- People we spoke with said if they wanted to make a complaint they would contact the office, but no-one had ever had the need to make a complaint about the service they received.
- Staff we spoke with were aware of what to do should someone wish to make a complaint and it was clear people were treated with compassion and would be supported to make a complaint if they wanted to do so.

#### End of life care and support

- The provider had systems in place to ensure people had a comfortable and dignified death.
- The staff team received end of life care training. However, some undertook specialised training in this area and were called palliative care assistants. The care plans we saw for those on end of life care reflected their needs well.
- The service user and their loved ones had been involved in the planning of their end of life care and the staff team ensured their wishes were respected.

# 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 the last inspection this key question was rated as good. At this inspection this key question has remained the same. 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 and her staff team promoted a positive culture which achieved good outcomes for people.
- Everyone we spoke with praised the staff team and said the registered manager was approachable.
- The provider had periodically sought feedback about the service from service users and their loved ones.
- Feedback received from staff members about the management of the service was positive.

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 very helpful and co-operative throughout the inspection process. She was open and honest, demonstrating good knowledge of the service and the needs of those who used PCS. This helped to support the duty of candour.
- We received very positive feedback from staff about the management team and the support they provided. One staff member told us, "I am happy working here. I have never known a company like them (in a positive way). We have a good team and I feel supported. [Name] is a great manager. She has helped me a lot and I could go to her with anything. I have never seen anything to concern me." Another commented, "I love it here. They [staff] are family and I love them all. It is a good team. I can't imagine working anywhere else. We are all there for each other. [Manager] is incredibly passionate. She is there all the time. She goes above and beyond by doing things for people all the time."

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements

- The provider had systems in place, which ensured the quality of service was effectively assessed and consistently monitored.
- During the inspection information was provided promptly when requested. The provider always informed the Care Quality Commission when things went wrong, such as allegations of abuse, deaths or injuries to people. This demonstrated an open and honest culture had been adopted by the service.
- The registered manager completed regular audits and checks, which helped to address any areas for improvement and to further develop any areas of good practice.
- Internal systems were in place to check on staff performance.
- Staff understood their roles and were able to discuss the needs of those in their care well.

- The provider had implemented a comprehensive business continuity plan, so the staff team were aware of action they needed to take in the event of any emergency arising.

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

- The registered manager had displayed a wide range of information at the agency office, which was useful for those with an interest in PCS. Additional material was incorporated into the service user guide.
- It was clear strong links had been established with the local community and external health and social care professionals.
- Satisfaction surveys had recently been conducted by those who used the service and staff members. The results of these were produced in a chart format for easy reference and action plans had subsequently been developed. Positive responses about the service were evident.
- Multi-disciplinary meetings were held, which included the person using the service and their relatives, as well as wide range of community professionals and staff from the service.

Continuous learning and improving care

- The provider had systems in place to ensure the staff team were continuously learning to consistently improve the care provided.
- The registered manager conducted a wide range of audits on a regular basis. The service had achieved the silver award for Progress for Providers in care services. This is a self-assessment tool for managers to use with their staff to check how they are doing in delivering personalised support for people using care services. This ensured the quality of service provided was appropriately assessed and continually monitored.
- People were encouraged to make suggestions about possible improvements or to comment on current good practices.
- The provider had systems in place which helped staff to develop their skills and knowledge. Team meetings were taking place and action plans were subsequently developed. Staff performance was regularly monitored through recorded observations and individual supervision. This demonstrated the service was continually striving to improve.
- An extensive range of updated policies and procedures were available for the staff team, which supported continuous learning and improving care.

Working in partnership with others

- The service demonstrated good partnership working had been established.
- Records showed community professionals were involved in people's care and support. Those we spoke with provided very positive feedback about the service and staff team.
- The home also demonstrated good partnership working with families of those who used the service. All relatives we spoke with confirmed they would be able to speak with the registered manager or any staff member, as they were all very approachable.

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, which supported the staff and management team to be open and honest.
- Systems adopted by the service showed accidents, incidents and safeguarding events were managed in an open and honest way, so everyone involved was kept up to date with progress and the staff team learnt lessons from situations where things went wrong. This supported the duty of candour standards.