

Penrose Care Ltd

Penrose Care Limited

Inspection report

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Ratings

Overall rating for this service

Outstanding 

Is the service safe?

Good 

Is the service effective?

Good 

Is the service caring?

Outstanding 

Is the service responsive?

Outstanding 

Is the service well-led?

Outstanding 

Summary of findings

Overall summary

About the service

Penrose Care Ltd is a domiciliary care service that provides personal care and support to older people in their own homes in and around North London. People receiving a service included those with physical disabilities, and health issues relating to the progression of age. At the time of this inspection the service was providing a service to 12 people out of which seven people received the regulated activity of personal care.

People's experience of using this service and what we found

Penrose Care was a small service embedded in the community in North London. The service had a well-defined ethos to remain small and provide holistic and highly personalised care. The most characteristic of the service was that the support they offered met people's specific needs and enabled them to live their lives as comfortable as possible despite the need for care and support. The service's commitment to improving people's lives led to their families being overjoyed with the care. This was because the highly effective and responsive care led to improvements in people's wellbeing in ways families wanted but never expected.

The service's strong ethical stand extended toward their staff. The service provided the staff team that was suitably paid, well trained, supported and motivated to do their best. The "No Problem" approach meant that the service was very adaptable and dealt with arising issues efficiently and easily. The service empowered staff to sort things out and go the extra mile to ensure people receive their needed care.

Stakeholders, including people using the service, their relatives, local community members, and external health and social care professionals, gave consistently positive feedback about this service. They described the service as very well run, passionate about supporting people, and highly responsive to people's needs. They described staff as intelligent, well trained and having an exceptional level of commitment to facilitating people's improvement. They gave us numerous examples of how staff commitment to providing a high standard of care and readiness to go the extra mile contributed to the wellbeing of their relatives improving.

Staff had an in-depth knowledge of people's needs which they achieved through extended induction every time they started supporting a new person. The same small group of care staff supported each person. This helped to develop a trusting and friendly relationship between people and staff. People's care plans were comprehensive and provided staff with detailed information on risks, needs and preferences related to people's care.

Staff proactively sought continuous professional development to ensure they knew how to best support people. The staff promptly sought support and liaised with other health and social care professionals when needed. As a result, staff safely and effectively met people's needs.

The provider regularly consulted people about their views of the service. People and family members confirmed that they were fully involved in planning people's care and that staff promptly acted on any

changes to the support needs. They told us that this readiness to respond to emerging needs gave people and relatives additional comfort and reassurance that the service could meet people's needs.

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.

The provider was passionate about ensuring that they suitably rewarded staff employed at the service for their continuous contribution to improving people's wellbeing. They provided staff with the necessary and additional benefits, not common in similar services, such as, medical insurance, safe transport home to and from work and full-time employment contracts. Staff confirmed this had contributed to their wellbeing and work satisfaction. They described the managers at Penrose as always exceptionally supporting and caring.

The provider's contribution to the quality of life of people using the service and the local community was outstanding. They initiated, funded, and carried out a range of initiatives within the local community to ensure the quality of life for people's families and other local community members improved. This was especially observable during the Covid-19 pandemic. For example, the service started an alfresco dining initiative called "Streatery" and delivered PPE resources to other health services at the start of the pandemic.

The registered manager monitored the quality of people's care and support provided by Penrose Care. They have stayed in regular contact with all people who used the service and their families and staff to ensure people were happy with the service received and that staff had everything they needed to provide a high standard of care.

The service had effective processes and procedures in place, which helped ensure the service met all the Health and Social Care Regulations.

Staff received appropriate training and induction to ensure they safeguarded people from harm and that the care they provided was effective. The recruitment procedures were safe, and the provider ensured that only suitable staff supported people. We were assured that the service followed current guidelines on infection control and Covid-19 risk reduction measures. The provider had a range of effective quality monitoring systems that helped to ensure the continuous provision of ethical and high-quality care. Any shortfalls in the care provision were quickly spotted and addressed.

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

Rating at last inspection

Outstanding (last report published on 08 April 2019)

Why we inspected

This was a planned inspection as part of our quality assurance process checking a range of Good and Outstanding services.

Follow up

We will continue to monitor information we receive about the service until we return to visit as per our re inspection programme. If we receive any concerning information we may inspect sooner

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 exceptionally caring.

Details are in our caring findings below.

Outstanding ☆

Is the service responsive?

The service was exceptionally responsive.

Details are in our responsive findings below.

Outstanding ☆

Is the service well-led?

The service was exceptionally well-led.

Details are in our well-Led findings below.

Outstanding ☆

Penrose Care Limited

Detailed findings

Background to this inspection

The inspection

We carried out this performance review and assessment under Section 46 of the Health and Social Care Act 2008 (the Act). We checked whether the provider was meeting the legal requirements of the regulations associated with the Act and looked at the quality of the service to provide a rating.

Unlike our standard approach to assessing performance, we did not physically visit the office of the location. This is a new approach we have introduced to reviewing and assessing performance of some care at home providers. Instead of visiting the office location we use technology such as electronic file sharing and video or phone calls to engage with people using the service and staff.

Inspection team

This inspection was carried out by one ASC inspector and one Expert by Experience. An Expert by Experience (EXE) is a person who has personal experience of using or caring for someone who uses this type of care service.

Service and service type

Penrose Care Ltd is a domiciliary care service. It provides personal care to people living in their own houses and flats in the community.

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. The registered manager was also the owner of the service

Notice of inspection

We gave the service 48 hours' notice of the inspection visit because we wanted to make sure the registered manager and staff were available on the day of our inspection

What we did before the inspection

We reviewed the completed PIR and previous inspection report. We reviewed other information we had about the provider, including notifications of any safeguarding concerns or other incidents affecting the

safety and wellbeing of people. Prior to our visit our Expert-by-Experience carried out telephone interviews with three people who used the service and five relatives who gave us their feedback on the service provided. Additionally, prior to the inspection we emailed care staff employed by the service and external health social care professionals to ask for their feedback about care provided. . We received feedback from five staff and two health and social care professionals. This information helps support our inspections. We used all of this information to plan our inspection.

During the inspection

We spoke with the registered manager. We reviewed four people's care records, which included care plans, risk assessments and daily care notes and medicines administration records (MARs). We also looked at four staff files, complaints and quality monitoring and audit information.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at training data and quality assurance records.

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 service helped to protect people from harm from others. People using the service and relatives told us people were safe with staff who supported them. One person said, "I am very happy with my care and always feel very safe with the carers, as I have regular carers." One relative stated, "Yes, absolutely, my relative is safe with the carers. They are very responsible and very intelligent people."
- Staff understood how to protect people from harm. Staff received safeguarding training, and they knew what action to take if they were concerned about people's safety and wellbeing. Staff told us, "Safeguarding is our aim and high priority. We are doing our best to protect people from any form of harm/danger," and "We do our best for our clients and colleagues to be protected from any harm or abuse at work or outside of the work."
- No safeguarding concerns have been raised against the service since our last inspection in February 2019.

Assessing risk, safety monitoring and management

- Care documentation provided staff with clear guidance on how to support people safely. The risk assessments were comprehensive. These included information about risks to people's wellbeing, health conditions, the required type of support, and other factors that could affect how people were and felt.
- The risk assessment documentation promoted safe risk-taking and reminded staff about ensuring the balance between people's needs (for example, walking) and risks (for example, falling). This positive risk-taking approach helped people maximise their choice and control over their lives and manage the risk related to these choices.
- Risk assessments were highly personalised and included detailed descriptions of risk minimisation strategies, equipment used to support people and the environment people lived in.
- Individual risk assessments also included risks related to safeguarding and the Covid-19 pandemic.

Staffing and recruitment

- The recruitment procedure was safe, and the service ensured people were protected from unsuitable staff. The recruitment documentation included references of previous employment and criminal records checks.
- Enough staff were deployed to support people. People and relatives told us staff were reliable, always on time and never missed a visit. Some of their comments included, "They are pretty good at timekeeping" and "They are very reliable and always turn up on time". Relatives confirmed this by saying, "They are never late, or if there has been a problem with traffic, they always let me know."
- People were usually supported by the same staff which the service thoughtfully matched with people according to specific characteristics. This helped to develop positive, friendly relationships between people and staff. Family members told us, "There is a team of regular carers, and we always receive a monthly list as

to who will be covering calls for my relative" and "The owner keeps on top of things to keep his clients safe and recruits the best with the skills required to deliver high-quality care."

Using medicines safely

- Medicines were managed safely. When it was agreed, staff administered medicines to people. Where people took their own medicines or family members led on this, staff prompted people and families to ensure people received their medicines. One person told us, "I take my own medicine, but the staff always ask if I have taken my tablets and check." A relative said, "I usually manage my relative's medicines, but the carers check. When they administer medicines, this is recorded."
- When staff shared medicines' administration with family members, this had been clearly described in people's files. Specific agreements between the service and the family were in place to ensure people received their medicines as prescribed.
- The service had an effective medicines auditing process that included daily managerial and peer audits. Any medicines errors had been identified quickly, reported and recorded according to the provider's procedure. We saw that improvement actions had been agreed to ensure medicines errors were not repeated.

Preventing and controlling infection

- We were assured that the provider was meeting shielding and social distancing rules. One staff told us, "I had the necessary training. Our manager is always updating information, via team chat on WhatsApp, email or phone" and "At the arrival of each shift, we are checking the temperature, and then we put a surgical mask if we are nearer than to two meters to people."
- We were assured that the provider was using PPE effectively and safely. Family members told us, "They are very careful about infection control, especially with the pandemic, so we have always felt safe with them" and "They always wear their PPE and change their gloves regularly." One staff member said, "We have been given plenty of PPE, and we have constant access to it whenever we need it. I have been provided with all types of masks, shields, gloves, aprons, tests kits, shoe covers, hair nets, hand sanitisers, and antibacterial gels."
- We were assured that the provider was accessing testing for people using the service and staff.
- We were assured that the provider's infection prevention and control policy was up to date.
- There were appropriate risk assessments in place to guide staff and managers on how to effectively reduce the risk of the Covid-19 infection.

Learning lessons when things go wrong

- The service managed accidents and incidents to a high standard. The registered manager monitored all events when people's health and wellbeing was at risk. They took action to minimise the risk, ensured the lessons were learnt and that similar events did not happen again.
- We saw that when needed, staff supervision was used to discuss accidents and incidents and to ensure staff had sufficient skills, knowledge and training to support people safely.

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 our last inspection we rated this key question as outstanding. At this inspection the rating has changed to good. This meant people's outcomes were consistently good, and people's feedback confirmed this.

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

- The staff, people, their families, and professionals described Penrose Care as providing highly effective and an exceptional service. All stakeholders praised Penrose for their ability to adapt to the situation and quickly respond to people's changing needs. One relative told us, "The company are very flexible to changing needs."
- Proactive decisions made by the service in conjunction with people and relatives ensured that during the Covid-19 Pandemic, people stayed safe and engaged. Many support packages provided by Penrose changed into 24 hours support where the same small number of staff supported people. This significantly reduced the risk of Covid-19 infection, isolation, and deteriorating wellbeing.
- The service provided staff with a taxi service to and from care visits, so they did not use public transport. The registered manager told us, "We need to ensure we do not catch Covid, so our clients do not catch it." The effect of this and other Covid-19 related decisions was that none of the Penrose clients had been ill with Covid since the Pandemic started.
- People and relatives told us how staff hands-on and imaginative support directly contributed to improvement in the health and wellbeing of people. Examples given by relatives included, "The carers are very proactive and really stimulate my relative by engaging her in different activities. It keeps my relative lively and stimulated" and "The carers encourage my relative to do exercises and will use online tutorials and other technology to show my relative how the exercises are done." Another relative told us how effective staff support helped their relative to lessen unwanted effects of a complex health condition.
- The service ensured people and their loved ones received necessary health care support when needed. One person told us, "The carers monitor my skin and if they see a red mark always inform my family member." In the compliments received by the service one relative expressed their gratitude for staff willingness to support their relative while they had to look after another member of their family. The family member said, "(Staff name) was very flexible to look after my relative and then stayed longer to help more. This did not faze her. Thank her again from us."
- The service received very positive feedback from external health professionals. One professional told us, "We share knowledge and advice which has been especially useful during the pandemic."

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

- The assessment process was thorough and included an in-depth, and empathetic assessment of people's needs and preferences. Considering the risks related to the Covid-19 pandemic, the managers personally visited people who wanted the support. This helped to ensure the service gathered enough information and initiated positive relationships with people and their families.

- People and relatives confirmed they participated in the assessment of their needs. They told us that the care people received was exactly what they needed and wanted. One person told us, "Staff and the owner have a very good understanding of my likes and dislikes and know where everything is and my routine." One family member said, "My relative has a care plan that we were both involved with, and it meets all his requirements that were identified."
- Penrose Care delivered care in line with current standards and the law. The service helped people and their relatives to become familiar with these. People's care plans included a range of general guidance around providing care supporting people at home. These included Moving and Handling, managing people's money, medicines and others.

Staff support: induction, training, skills and experience

- Staff received mandatory and additional training as required. We noted that apart from compulsory training, staff had proactively broadened their skills and knowledge to provide high quality and bespoke care to individual people. Staff told us, "I keep developing myself constantly through mentoring and courses. I build strong professional relationships with all of my clients. I support them emotionally and physically" and "We are supported through training, and we can get even more training online or face to face to have more knowledge about our clients and to be able to support them at home."
- People and relatives spoke highly about staff ability to support people effectively, and they confirmed staff skills and knowledge had directly contributed to people's wellbeing. One family member told us, "As my relative's illness progresses, the staff have been wonderful with offering advice as to how to manage the change and put various techniques into place to help him become more engaged."
- New staff received induction, including an introduction to the service, mandatory training, and shadowing of their more experienced colleagues. The induction process was in-depth to ensure staff were prepared to support people unsupervised. One manager told us, "Everyone new at Penrose care are doing a minimum of 30 hours shadowing where they see how the job is done. That is the moment where all the questions are solved as well with them and that will online courses that are necessary to be able to work alone."
- Staff who were not new to the service but new to the package had also shadowed their colleagues to ensure they provided care that was needed. Staff told us, "when we have a new client or new colleague, we do a shadowing job. It helps us to maintain our knowledge about the client and gain new knowledge if it's a new client for us" and "We are always introduced to the client and shadow someone at the client's house before we start working alone."
- Staff received regular supervision and support in the form of regular team meetings, one-on-one meetings with line managers, and ad-hoc support. All staff said the managers' support directly contributed to staff ability to provide the high quality of care that was often over and beyond basic care to people. Their comments included, "I'm regularly mentored and managed. Our amazing managers are available 24/7 for assistance. They always check on staff if we are ok" and "We receive all the training necessary to help us to do a great job."
- External professionals spoke with confidence about staff ability to support people safely and effectively. They confirmed that staff were curious and sought additional knowledge on best ways of working with people, especially when faced with new or less common conditions including the Covid-19 virus.

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

- Staff supported people to have a nutritious diet that met their needs. People and relatives praised staff for promoting good nutrition habits. One relative said: "Staff are very good at encouraging my relative to drink water to keep her hydrated and will always ask what she would like to eat."
- Care plans gave staff detailed information about people's nutritional needs and preferences. These included foods that people liked to eat, how they wanted their meals to be served, where and when. Care plans included descriptions of food that people could and could not eat, guidelines for meals preparation

and the type of experience people had when eating. For example, if people's sense of taste was affected, this was reflected in people's care documentation.

- Care plans had information about risks related to individual diets. Where people's health could be affected by the type of food they consumed, staff helped monitor their well-being so people could enjoy the food they liked and stay healthy. For example, they did regular blood sugar checks for people with diabetes.
- Staff received training in food hygiene and nutrition support to help them to ensure people receive healthy nutrition safely.
- Staff received further training on how to provide dignified and respectful nutritional support to people. They told us how they learned about specific food customs of different cultures and religions. This helped to ensure staff could support people with these customs and not offer the food that was not suitable for the occasion.

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 service provided staff with detailed information about people's individual ability to make decisions. Most people using the service had the full mental capacity to make their choices. At times they wanted to use their family support to make decisions. This was clearly stated in people's care documentation.
- Care plans described people's choices concerning their environment, care needs, and daily routines.
- People, or when appropriate, their representatives, signed people's care plans showing that the consent to care provided by the service was given by the correct individuals.
- Staff received training, and they understood how to work within the principles of the Act. They told us, "We always provide choice and ask for consent (if/when possible) regarding people's food or drink, clothes (what to wear), personal care, medication, and activities" and "We always need to get the consent or permission from our clients when we going to do something with them or for them. We also give them the choices."

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 Outstanding. At this inspection this key question has remained the same. This meant people were truly respected and valued as individuals; and empowered as partners in their care in an exceptional service.

Ensuring people are well treated and supported; respecting equality and diversity

- People and family members consistently gave very positive feedback about the supportive nature of the service. People said, "They really are very good, I can't fault them at all", "I am treated with kindness and dignity the carers are like our friends", and "They are all excellent carers." A family member said, "Staff are so good compassionately providing care. This is very empowering to my relative, and we have complete confidence in Penrose" and "The carers from Penrose are a lifesaver for the family."
- External health and social care professionals told us about their very positive experiences with this service. They said, "I have absolutely no concerns. They are one of the few agencies I am happy to work with" and "Several clients known to me have fed back to me how well cared for they have felt by Penrose staff."
- We noted numerous examples of staff effortlessly going the extra mile to support people. With no hesitation, the staff responded quickly to people's changing, sometimes sudden needs. We were told about a staff member who travelled at night to visit a person who needed immediate support with their personal care. Another staff one evening stayed at the person's home longer than they needed to support this person with a domestic issue that caused them anxiety. The staff member helped the person to calm down by offering reassurance and removing the trigger of their anxiety.
- As per the previous inspection, staff always had time for people and engaged them in positive interactions. One person told us, "They chat away to me but are not over-familiar, and they are all very respectful. They are very sociable." Relatives commented, "The carers are never rushed and have plenty of time to interact with relative and meet her needs" and "The staff are lovely with my relative and very kind and never look at the clock, they give her lots of time."
- Staff had training in equality and diversity. The provider's values of "Compassion at the heart of care" was clearly visible in everything staff did for people. The staff respected people's cultural and religious needs and the ways people lived their lives. One staff member told us, "Penrose Care is 1000% ethical, and that is probably one of the best reasons I love to work there. We are taught/motivated to always be gentle, affectionate, calm and competent."

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

- People and their family members felt always fully involved in making decisions about people's care. They described care plans as comprehensive and precisely reflecting what support people needed. Equally, the care itself reflected guidelines from the care plans meaning people received the support they wanted.
- The provider paid particular attention to ensuring the most suitable staff supported each person. They matched people and staff on a range of criteria and provided staff with assistance to ensure staff knew what people wanted. One person told us, "They make my breakfast, and my coffee just right, just how I like it",

and, "They are pretty good with providing care for me." Relatives said, "They place carers that have things in common with my relative. Staff encourage my relative to use his skills and interact well with him. He enjoys this" and "When a new staff starts, they are introduced by the regular carers and spend time getting to know my relative's routine."

- Staff told us how important it was to develop a positive relationship with people. The provider's systems helped staff to achieve it. Staff said, "We do this job from passion, making it natural and easy to build relationships with clients. We have an introduction system when we meet and get to know clients. This helps to build relationships with them," and "We have the training, mentoring and our colleagues or managers introduce us to new clients. We never rush our visits. This helps to break any possible barriers, build good relationships with people. It supports their wellbeing, self-respect and dignity."
- The service was sensitive to people's changing needs, and they adapted the support accordingly. One person using the service told us, "They go over and above what is required." One family member told us, "They are very flexible about call times if we need to change them" and "(The staff name) is always on hand to take your calls, day, night or anytime over the weekend."
- As per our previous inspection, consistent staff support, including regular, agreed exercise routines and gentle continuous encouragement, improved people's wellbeing. For example, they could mobilise better or were less reluctant to receive care. One person told us, "The staff have really helped with improving my mobility, and they take me out for short walks." One relative told us, "The care Penrose provide to my relative is wonderful, absolutely excellent as he is a reluctant care receiver."
- Staff spoke confidently about the importance of encouraging people's independence and self-worth. They told us, "We provide assistance where clients need help, so that they can do the best of their abilities and continue their daily life" and "We support our clients to do things for themselves. If it is cold and they want to go out to have some fresh air we say, all right, let's get nicely and warm dressed and let's go out to have coffee together."

Respecting and promoting people's privacy, dignity and independence

- Staff always respected people's privacy and dignity. People told us, "Staff help me shower and dress in the morning and provide me with as much privacy as possible. They are very considerate," and "I feel ok with them here, and I want them to be here."
- Staff were clear that providing dignified care that promoted people's independence was very important. They told us, "I always work with clients with respect to their dignity. I'm always using PPE during personal care, and I make sure that their body is covered as much as is possible" and "I always ask for consent, and I inform the client of what I am doing. I keep doors and curtains closed."
- People's care plans had detailed information on what personal care staff needed to provide. This included toileting, grooming, instruction on using any equipment or care aids and actions that needed to be taken to ensure the person was comfortable.

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 now improved to outstanding. This meant services were tailored to meet the needs of individuals and delivered to ensure flexibility, choice and continuity of care.

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 service exceeded their efforts to reduce social isolation during the Covid-19 pandemic. In July 2020, Penrose (a founding member of the local business association) launched the Belsize Village Streatery - an alfresco dining initiative. This led to creating a new community space where people using the service, their families, staff from the nearby hospital, and other community members enjoyed the food and the company of others during the pandemic. A local Councillor on the Belsize Village internet website states, "The benefit to the area and the local community that the Streatery has brought has been terrific in the time of the pandemic."
- The service used various approaches to support people, especially those with dementia, to stay perceptively connected with others and their surroundings. The service had two cats that, when safe and appropriate, visited people with care staff to help to improve people's wellbeing and comfort. We were told about at least one person whose wellbeing, mood, and cognition improved due to this therapeutic intervention.
- Staff supported people in sustaining and developing their interests, particularly during the Covid-19 pandemic. One family member told us how staff encouraged their relative to have walks in the community, which they always enjoyed. They told us, "Staff takes out my relative. If she is struggling, staff will assist her into the taxi." In two other examples, staff supported people in developing their new language skills. One staff member told us, "I always encourage people to maintain, when possible, their previous activities and to manage their energies not to overdo it or not to let their illness stop them from doing what they enjoy."

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

- People and their relatives consistently told us that they felt in control over their support. They said staff enabled them to make decisions and have choices around their care. "One person told us, "I made my own decisions about what assistance I need. That was written in my care plan" and "They meet my needs at the moment."
- People received highly personalised care, and its bespoke nature resulted from the provider's willingness to change and adapt the support to meet people's needs. In at least three examples, staff worked beyond their initially agreed hours to ensure people received the help they needed. One case included a rapid change to a 24hours package so a relative of a person using the service could attend an important family event abroad. The person told us, "The 24-hour care I had was absolutely excellent, and I had Michelin star food as the ladies have excellent cooking skills."
- Staff prided themselves on their ability to provide bespoke support to people. This was an important part

of their work. One staff member told us, "The company provides excellent care and support to the clients, and we are always open to suggestions to make the client's life more comfortable."

- Each person had an individualised care plan with detailed information for staff on supporting people. Care plans included information on people's care needs and preferences and how they wanted to receive their care. There was a very high continuity of care as each person had a dedicated team of care staff. However, the high level of detail in care plans meant that any staff member, who was less familiar with the person, would have clear guidelines on what the person needed.

- Staff worked proactively, using their best skills and experience to support people. People and relatives described how staff positive contribution meant people could remain in their own homes and with their loved ones. One person described how staff thorough knowledge of their health condition helped to improve their mobility." At least three relatives expressed how staff engagement enabled their loved ones to improve their health, slower the development of progressive illness and enjoy various activities, such as walking, speaking various languages and enjoying food.

Meeting people's communication needs

From 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.

- Care plans provided staff with guidelines on communicating with people to ensure they could hear, understand and respond. For example, if a person had a hearing impairment, care plans advised on where to stand when talking to them. In another example, staff were told how the person's progressive illness affected their ability to speak English, how they were dealing with it and what staff could do to help.

- Staff knew people well, and they told us they modified the support to meet people's communication needs. One staff member told us, "If a client cannot communicate verbally with us, we get their permission in a different way, such as nodding, written consent, moving hands or legs et cetera."

End of life care and support

- The service worked closely with the palliative care team, and, as described by people's relatives, they provided exemplary care. We were told about three cases where outstanding support contributed to people's health significantly improving. A compliment received by the service states, "It is impossible to thank the carers, for their intelligent, compassionate and tender care which gave my relative extra time and a good life for longer than we could have hoped for" and "(Staff name) is absolutely brilliant. It's been three weeks since my relative has been (receiving support), and it's been truly remarkable. The warmth and humanity, as well as the skill, has been great."

- Staff had carried out conversations with people about their end of life wishes and preferences. The outcomes had been recorded in people's care plans. When people chose not to have such a discussion, staff had respected this.

- We saw that staff had received training in end of life care to understand the subject better.

Improving care quality in response to complaints or concerns

- The provider had a complaint procedure, and it was available to people if they wanted to raise concerns about care received. Since our last visit in April 2019, the provider received one complaint. We saw the service dealt with it promptly and tactfully regarding the individual complaining.

- People and relatives told us that they never complained and had complete trust in the service. They said that managers at Penrose proactively engaged in people's care, and any issues or suggestions for improvement were acted on immediately. They said, "The owner is excellent. He is quick to respond to anything we need to speak to him about" and "We have never needed to address any issues and never

needed to complain."

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 now improved to Outstanding. This meant service leadership was exceptional and distinctive. Leaders and the service culture they created drove and improved high-quality, person-centred care.

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

- We received unceasing, positive feedback for the managers and staff at Penrose Care. People and relatives described the care at the service as continuously exceptional. They told us that the support offered by the service was holistic and it directly contributed to good outcomes for people. They attributed staff caring approach to people living a healthier, calmer and more comfortable life. The positive outcomes ranged from improved physical health, better emotional wellbeing and exceeded life expectancy. Staff positive input provided people and their relatives with additional time to enjoy themselves together.
- The managers at Penrose Care ensured staff enjoyed their work and felt secure, always looked after, and appreciated for their ongoing support and dedication towards people and the provider. All staff employed at the service had full-time employment contracts giving them employment security. Staff were provided with additional support, medical insurance and paid transport home during the working night hours and throughout the Covid-19 pandemic. In September 2019, Penrose care was accredited with the Mayor of London's Good Work Standard, an initiative of the Greater London Authority to promote decent work in London.
- Penrose care provided people with a comprehensive assessment of their needs and individualised care planning to ensure people needs were fully met. The service's appeared to have a "No problem" approach meant that people's rapidly changing needs were addressed quickly. This provided reassurance to people and their families. One family member told us, "The company is here when I need them and they are very supportive which is very comforting to us, as a family."
- The leadership at the service was highly visible. Their high ethical care standards of providing best care with compassion and care for those who they care for and employ, were observable in everything they did. One person told us, "The owner is excellent, and he completed a thorough risk assessment with me." One family member said, "Penrose Care has got it right, they are easy and a pleasure to work with. They have a lot of common sense and are passionate about what they do."

Working in partnership with others

- Penrose Care improved the quality of life for people, their families, and the local community during the Covid-19 pandemic. Penrose led and partially funded the clear up of the local town square called Belsize Village, turning it into a safe during the pandemic place for gathering and socialising. One member of the local community stated, "It has provided me with space to connect with friends and family or to watch the world go by... Older people desperately need to connect, and that's what Penrose Care have helped to create. A beautiful, spotless oasis where us oldies can escape and enjoy being with others." The initiative

was praised across social media and local newspapers. In one newspaper, a health worker stated, "The Stretery has been a sanctuary for a lot of us working at the hospice. It was something to look forward to after shifts or during lunch."

- Members of Penrose Care helped other health services by providing PPE at the earlier stages of the Covid-19 pandemic. The registered manager on the service's internet website stated, "From this position of strength (high supply of PPE), we have been able to look outward during these difficult times, delivering donated PPE to a local hospital and hospice."
- Stakeholders continuously gave positive feedback about Penrose and its partnership with other services. One healthcare professional told us, "Staff respond to my advice, implement my suggestions and follow my direction". A member of the local volunteering organisations said, "Penrose Care is clearly a business that cares deeply about the community that surrounds it and about all the people within it. In particular, the way they seek to engage and care for the elderly by empowering them and improving their everyday lives is a joy to behold. Thank you, Penrose Care, for everything."

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

- The proactive and imaginative approach from Penrose meant that people received highly effective care even during the Covid-19 Pandemic. People using Penrose care have been free of Covid-19 infections since the Pandemic started in March 2020.
- Staff modified care to meet people's needs and the national Covid-19 guidelines. Their approach reduced the unpleasant effects of the Pandemic and improved people's physical and emotional well-being. One person told us, "Penrose staff work to protocols that illustrate good leadership and keep clients safe. The owner is very on the ball and meticulous with his care planning." One family member said, "I wouldn't work with any other service to provide an enhanced package of care as they are very, very good."
- Staff spoke highly about the managers at the service. They all felt supported and guided effectively to do their work the best they could. Their comments consistently pointed at the supportive culture at the service. One staff member said, "I'm 100% sure I couldn't find this kind of treatment and working conditions anywhere else. I love to work for Penrose Care. I feel safe, protected and my work is appreciated."
- There was a clear management structure, including the registered manager and one deputy manager. The members of the management team knew their responsibilities and what they were accountable for.
- Care staff had guidelines on what was expected from them in their role. They told us about their duties as a care staff and the ethical values underlying everything the Penrose care staff did for the people they supported. One staff told us, "Penrose Care is very well known for its high ethics and standards. All of us are caring, intelligent, emphatic and enthusiastic people from character."
- The quality monitoring systems in place were effective. These included a range of managerial audits, such as daily medicines and ongoing care plan reviews.
- The registered manager understood their responsibility under the duty of candour. They told us, "Whenever we make a mistake, we inform respective people, and we will always apologise. The last time I had to issue a letter of apology was in 2018."

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

- One of the strongest sides of Penrose was that staff could use their skills and interests to benefit people. The managers enabled and encouraged staff to enhance their specific interests, skills and talents and use them to improve the care provided to people. Therefore, we saw excellent outcomes around supporting people needing palliative care, learning languages, therapy with animals, improving specific aspects of health, among others. In one example, staff were encouraged to use their event management skills to lead the clean-up initiative of the Belsize Village square to create a beautiful space for the local community. One

staff member told us, "The company is always open to suggestions."

- Regular contact between staff and the managers ensured all were well informed about people, changing needs, changes to national guidelines and any matters related to the service provision. One staff said, "There are here for us 24/7 about the clients and personal matters. They cared for us during the pandemic texting us or calling us to check if we felt alright or needed anything. They are here for us as a family and always help us." A family member told us, "The carers and the owner are very good at communicating between each other and the family regarding any changes in relative's needs."
- The managers maintained regular contact with people using the service and their families to ensure people were happy with the support received. One person said, "[Manager's name] is very good and comes out to see me and check all is well, and his staff are well trained and keep good records." One family member told us, "The owner of the company calls me regularly to make sure I am happy with my relative's care."