

King Homecare LTD

King Homecare

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

King Homecare is a care at home service providing personal care to people in Windsor, Berkshire. The service provides support to older adults, people living with dementia or mental health conditions, and those with sensory impairments or physical disabilities. At the time of our inspection there were 6 people using the service. The service employs 3 staff, which includes the registered manager. The service provides additional non-regulated support to people such as cleaning, shopping and companionship.

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

People were protected from abuse, neglect and omissions of care. People's likes, dislikes, preferences and choices were recorded. Risk assessments were in place but would benefit from a risk rating to understand whether the risks were effectively mitigated. Medicines management was safe. People were protected from infections. Enough staff were deployed, and personnel files contained all the necessary information required by law.

Care was person-centred. People received sufficient food and drinks, and this was covered in their support plan. The service worked well with community healthcare professionals. Care was compliant with the Mental Capacity Act 2005 requirements. Staff receive appropriate training and support, including supervisions.

There was a lot of positive feedback about the service, from people, relatives, staff and community professionals. People and relatives were involved in the care planning and review. People's independence was encouraged and promoted.

The support plans were individualised and stated what needs the person had and how they were met. Daily notes were good but could include more information about emotional and psychological welfare. There was a satisfactory method for managing complaints, however there were no complaints. The registered manager dealt with concerns when they were alerted to them. The service and staff actively helped prevent social isolation.

There was a good management oversight of the service. There were clear aims and objectives for the service. There were no notifiable safety incidents, but the registered manager needed to refresh their knowledge about the duty of candour requirement and how it applied to the service, including access to a suitable guidance document for support. Work on a continuous improvement plan was ongoing. There were a series of audits and checks in place to determine the safety and quality of the care. There was good effort to engage and encourage feedback from people and relatives. Regular staff meetings were held. There were

good links with the local community and social care professionals.

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.

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 16 July 2020 and this is the first inspection.

Why we inspected

This is the first inspection since the new provider commenced operating 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?

Good ●

The service was safe.

Details are in our safe findings below.

Is the service effective?

Good ●

The service was effective.

Details are in our effective findings below.

Is the service caring?

Good ●

The service was caring.

Details are in our caring findings below.

Is the service responsive?

Good ●

The service was responsive.

Details are in our responsive findings below.

Is the service well-led?

Good ●

The service was well-led.

Details are in our well-led findings below.

King Homecare

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

Our inspection was completed by an inspector 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.

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

We gave the service 48 hours' notice of the inspection. This was because it is a small service and we needed to be sure that the provider or registered manager would be in the office to support the inspection.

Inspection activity started on 1 February 2023 and ended on 3 February 2023. We visited the location's office on 1 February 2023.

What we did before the inspection

We reviewed information we held and had received about the service since the time of registration. We used information gathered as part of our telephone monitoring activity dated 4 August 2022 to help plan the inspection and inform our judgements. We sought feedback from the local authority and safeguarding team. We checked information held by Companies House and the Information Commissioner's Office. We checked for any online reviews and relevant social media, and we looked at the content of the provider's website. We used the information the provider sent us in the provider information return (PIR). This is information providers are required to send us annually with key information about their service, what they do well, and improvements they plan to make. We took this into account when we inspected the service and made the judgements in this report. We used all this information to plan our inspection.

During the inspection

We spoke with 4 relatives of people who use the service. We spoke with the registered manager. The registered manager of this service is also the nominated individual. The nominated individual is responsible for supervising the management of the service on behalf of the provider. We received written feedback from 3 community social care professionals. We also received feedback from 1 care worker. We reviewed a range of records. This included 6 people's care records, 2 personnel files and medicines administration records. A variety of records relating to the management of the service, including policies and procedures were also reviewed. We wrote to the registered manager after the site visit and requested further documents and information. We received additional supporting information and written explanations to inform our findings and ratings.

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 newly 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 abuse, neglect and discrimination.
- Relatives told us that care and support was safe.
- Staff received training in safeguarding adults at risk. This was renewed on a regular basis, in line with best practice guidance. The registered manager confirmed that they knew how to report an adult at risk or potential and actual abuse.
- The registered manager reported safeguarding concerns to the local authority and Care Quality Commission in line with law. This was completed even when the person did not receive personal care but was supported in other ways by the service.

Assessing risk, safety monitoring and management

- People's risks were assessed, documented and mitigated to ensure they received safe support. Risk ratings were not used, however the registered manager acknowledged this and advised they would revise the risk assessments accordingly.
- The service obtained information about the person before they commenced providing support. This included detail from the local authority, hospitals and relatives. Information in social care assessments was primarily considered as the best source of information. We advised the registered manager to fully document their own assessment and they had an appropriate form to do so.
- People's risk assessments contained satisfactory details. They covered appropriate areas such as management of medicines, showering, diet, nutrition, eating, drinking and swallowing.
- Risk assessments included any risks arising from the person's home environment.

Staffing and recruitment

- The provider conducted robust assessments and checks of new staff. This ensured only fit and proper care workers supported people with their personal care.
- Personnel files contained all the necessary information required at the point of recruitment. This included ID, proof of conduct in prior employment and criminal history checks. Disclosure and Barring Service (DBS) checks provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.
- The registered manager understood the workforce shortages in the adult social care sector. They explained appropriate measures they used to recruit new staff.
- Enough staff were deployed to meet people's needs. This was based on people's needs and hours varied with changes in their dependency and health status.
- An electronic system monitored people's care calls. This alerted the registered manager to any late or

potential missed calls.

Using medicines safely

- Staff did not support everyone with medicines, but where they did this was completed safely.
- There was a suitable medicines policy and procedure. Staff received training in preparation, administration and documentation of medicines. The registered manager completed competency checks of care workers to ensure correct process was followed. This included unannounced 'spot checks'.
- Effective oversight of medicines was in place via regular audit by the registered manager. Medicines incidents were reported and followed up. The care documentation system flagged any missed medicines.
- 'Homely remedies' (over the counter) medicines were recorded in the medicines records. The service followed best practice guidance because they documented all supplements people took.

Preventing and controlling infection

- The service and its staff worked well during the pandemic to protect people from infections.
- We were assured that the provider was supporting people safely to minimise the spread of infection.
- We were assured that the provider was using PPE effectively and safely.
- We were assured that the provider was responding effectively to risks and signs of infection.
- We were assured that the provider's infection prevention and control policy was up to date.
- Some relatives commented on cleaning of people's homes. We do not regulate cleaning other than when it involves personal care. We have passed the general concerns to the registered manager to follow up.

Learning lessons when things go wrong

- Incidents and accidents were logged.
- The registered manager conducted fact-finding or investigations, and appropriately documented any areas for improvement. This ensured the service attempted to prevent recurrence of similar events.
- We reported one incident to the registered manager, which was undocumented. They were not aware of it. The registered manager has followed up the matter.

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 for 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 likes, dislikes and care preferences were assessed and documented. Staff ensured people had choice and decision-making in support they received.
- One person's support plan stated how they liked their make-up applied. The documentation also stated they liked dancing, animals and eating cakes.
- People's daily care notes also suitably reflected the support they received. One entry in the notes stated, "For breakfast I [staff member] cooked scrambled eggs on toast which she [the person] loved and ate everything."
- The registered manager's knowledge of applicable legislation required improvement. We have signposted them to our website so they can further inform themselves.

Staff support: induction, training, skills and experience

- People received care from staff who had the necessary knowledge, skills and experience to ensure safe support. The care workers were dedicated and worked well.
- Staff received an induction when they commenced their role. This included statutory and mandatory training, 'shadowing' other experienced staff and competency checks by the registered manager
- Staff participated in satisfactory one-to-one sessions with their line managers. The registered manager acknowledged that supervisions sessions should be completed on a regular basis to ensure staff are well-supported.

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

- Not everyone was supported with food and drinks. Where they were supported, people's care workers ensured they prevented dehydration and malnutrition.
- Staff were trained in food hygiene and ensured the safe preparation of meals and drinks.
- Care plans were in place for nutrition. These included people's preferences and any allergies or intolerances.
- Where necessary, food or fluid charts were used to document people's intake.

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

- The service worked closely with other organisations to ensure effective care for people.
- The service liaised with the local authority, safeguarding team and dementia specialist services.
- A community professional stated, "All of my team has worked with King Homecare and [the registered

manager] has always communicated well with us and will do joint visits with us when needed. [The registered manager] works hard to ensure that those under her care are well cared for, with an individualised and respectful approach; [the registered manager] tries to provide the package of care that works best for her clients. We have received good feedback from families that have used her service. [The registered manager] is passionate about dementia and has years of experience working with clients with dementia. She applies this knowledge to those she works with, with positive results.

- The registered manager explained people were supported to access healthcare and attend appointments, as needed.

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 MCA 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.

- People's consent was correctly obtained and recorded in line with the MCA.
- Consent was recorded for various aspects of the care package such as personal care, release of personal information and obtaining photographs when needed.
- People's capacity to consent and decision-making abilities were documented in the care plans.
- We signposted the registered manager to the Office of the Public Guardian's services. This was so they could correctly check if someone else (such as an attorney or deputy) could legally make decisions on a person's behalf.

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 for 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; respecting equality and diversity

- People's care was kind and compassionate. People were treated as partners in care.
- The service respected people's differences, and ensured the principles of equality, diversity, human rights and inclusion were included in personal care.
- In preparation for our telephone monitoring activity on 4 August 2022, 11 people or relatives provided positive feedback. Comments included, "They have very good carers...they leave me to do what I can, but help me to do others", "Professional, empathetic and full of understanding and knowledge about dementia", "[The registered manager] also respected my mother's views and showed a genuine interest in her as a person, never lying about why she was there but keeping it relaxed and undemanding with no expectations", "The service was consistently excellent with additional assistance given with everyday activities when required" and "Always polite and flexible. I am kept well informed regarding any unusual behaviour my mother displays and they treat her with respect and dignity."
- Online reviews were consistently positive. There were 31 reviews since registration of the service. Comments included, "In addition to the regular care, my wife and I benefited a lot from the great depth of experience and qualifications. I always felt that someone is carefully listening to our issues and providing good advice to our specific situations even beyond the daily care duties", "King Homecare have been an excellent provider of care for my father. They are diligent and nothing seems to be too much trouble" and "They are kind, cheerful and supportive not just to Mum but to the whole family."

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

- People and their relatives were actively involved in making decisions about the support package. This ensured their views were obtained and used to promote a caring approach by staff.
- People and relatives were regularly involved in care planning and review.
- Staff respected people's choices and preferences. Wherever possible, the service accommodated people's wishes such as times of the calls each day and the care worker assigned for the support.
- People and relatives were able to access live updates about care provided via an online website. They stated, "...being able to access the portal or speak to the manager provides clarity and understanding for everyone. Whenever I need additional visits, they have proved to be flexible and accommodating" and "They [the service] post update reports every day on their website, and these are always detailed and informative. They maintain a proper care plan and their website always has full details of visits completed and who will be attending, for at least the next week."

Respecting and promoting people's privacy, dignity and independence

- People's care was dignified and respectful.
- The care and support provided helped people to be as independent as they could be.
- One person wrote, "I am so fortunate to have found such an incredible agency to give me the courage, support and help for me to remain independent in my own home. The care I have received is exceptional and without this support, I would not have survived."
- Relatives stated, "Both carers gained [the person's] trust very quickly, lifting a great load from my shoulders. They guided me well on how to try to deal with my wife's deteriorating dementia. They gave valuable help when I was faced with difficult decisions" and "They [staff] support and encourage, are proactive, show sensitivity when needed and work extremely hard to help maintain [the person's] independence and dignity. I have been astounded at how quickly they have gained the trust and established a good rapport."

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 for 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 plans were person-centred and identified aspects of life that were important to them.
- For example, care plans stated, "[The person] has a sweet tooth and will often say she is full from dinner (if she doesn't like the taste), but will always have pudding; she enjoys custard, crème caramel and trifles" and "Help [the person] with putting her legs in the bath then wash her back. [The person] likes to be left alone to soak so please adhere to that and she will shout when she is finished."
- A relative commented, "I found them [staff] to be most helpful, punctual and totally trustworthy. They spent time gathering information and was able to personalise a care plan for mum that included everything required."
- A care worker stated, "We can read about our clients and understand their needs. Tasks are listed for every visit allowing us to cross check everything has been completed and the clients' needs have been met. We also write a report at the end of each call which [the registered manager] views. She can then make any suggestions she has that could improve the effectiveness and quality of the service."
- Daily notes accurately reflected support provided to people during the personal care calls.
- We asked the registered manager to review the care notes to ensure staff documented people's emotional and psychological wellbeing as part of their support. They acknowledged this and stated they would ensure this was included in the future.

Meeting people's communication needs

Since 2016 all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard. The Accessible Information Standard tells organisations what they have to do to help ensure people with a disability or sensory loss, and in some circumstances, their carers, get information in a way they can understand it. It also says that people should get the support they need in relation to communication.

- People received information from the service and staff in a way that they could understand.
- People's sensory impairments such as hearing or sight loss, were recorded as part of their care plan.
- Adjustments were made to ensure people had access to important information. For example, one care plan stated, "[The person] had laser eye treatment done this year so her vision is very good now- glasses worn for reading. Would like to have someone visit the home to complete another eye test and now that her hospital appointments have been completed, we can support her in doing so."

Improving care quality in response to complaints or concerns

- The service had an appropriate complaints system in place to respond to any concerns.

- A satisfactory complaints policy was in place. People were provided with information that explained how to make a complaint. This was included in the service user guide.

End of life care and support

- The service can provide end of life care. At the time of the inspection, no one received end of life care.
- As a result of our telephone monitoring activity on 4 August 2022, we asked the registered manager to review the service's end of life policy and ensure staff have appropriate guidance in place. This work was ongoing.

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 for 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.

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

- The service had a positive workplace culture, which resulted in good care outcomes for people.
- The service had a clear set of aims and objectives, set out in their statement of purpose and on the website. These included, "...to provide quality domiciliary care services where people who use our service are treated equally by caring competent and compassionate staff. It will encompass the 6 c's in delivery of service; caring, compassion, competent, communication, courage and commitment."
- Staff said, "[The registered manager] is always available for support and advice. Schedules are prepared in advance. She considers people's personal situations and preferences."
- The service received consistently positive feedback from people, relatives and staff.

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 service promoted an honest and transparent approach in how it operated.
- The care workers and registered manager worked to reduce risks of harm to people and prevent incidents from recurring. They dealt with difficult situations well and liaised with other professionals when needed to ensure the wellbeing of people.
- Documentation showed people and relatives were informed of any incidents or adverse findings.
- The registered manager was able to explain what candour meant. Their understanding of the duty of candour requirement required improvement. We have signposted them to resources to help with this.
- There were no notifiable safety incidents since registration. These are serious incidents that must be reported by law. However, the registered manager had reported incidents that did not occur as a result of the care, for example someone who had fallen overnight and was found by care workers on arrival the next day. This ensured their safety and that relevant medical assistance was sought to prevent or treat any harm.

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

- A system of audits and checks on the safety and quality of the support to people was in operation. This included audits of medicines management, personnel files, people's risk assessments and support plans, daily notes and accidents and incidents.
- The registered manager described her 'hand on' approach. The registered manager provided personal care with the other 2 care workers. They had a good knowledge of the people who used the service.

- The registered manager had the appropriate knowledge, skills and experience to operate the service. They had obtained 3 qualifications in health and social care, and an advanced qualification in care of people with dementia.
- There was an action plan in place to track areas for improvement.

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

- People, relatives and staff had an active say in how the service was operated. They were able to provide feedback at any time, which would be considered by the registered manager.
- Regular surveys were conducted to gather people's and relatives' views. Feedback was consistently positive.
- Staff meetings were held on a regular basis. These included discussion about the people who used the service, their progress and any areas where additional support might benefit their health.

Continuous learning and improving care

- The registered manager had created a Facebook account for local registered managers, which had 177 participants. This was a good forum for sharing guidance, information and where managers could ask questions and receive others' views and answers to queries.
- In 2021, the service was voted and awarded as one of the top 20 home care providers in the southeast.
- The service had completed Herbert Protocols for people living with dementia. The Herbert Protocol is a national scheme introduced by the police in partnership with other agencies to encourage carers to compile useful information which could be used to help locate a vulnerable person if they go missing.

Working in partnership with others

- There were good links with other community services.
- The local authority stated they had a good working relationship with the service.
- One social care professional stated, "I have always found King Homecare to be very efficient, professional and compassionate when dealing with service users and professionals. I have only received positive feedback from service users in respect of the care provided by King Homecare."