

Camsco Care Services Ltd

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Inspection report

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Ratings

Overall rating for this service	Good ●
Is the service safe?	Good ●
Is the service effective?	Good ●
Is the service caring?	Good ●
Is the service responsive?	Good ●
Is the service well-led?	Good ●

Summary of findings

Overall summary

About the service: Camsco Care Services is a domiciliary care agency. It provides personal care to people living in their own homes. 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. At this inspection, one person was receiving personal care from the service.

People's experience of using this service:

The service had a registered manager in post. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.

Staff had received safeguarding training and understood how to recognise signs of abuse and how to protect people from the risk of abuse. Staff supported people to take and manage their medicines in a safe way. Recruitment checks were carried on staff before they started work. There were enough staff available to support people. There were systems in place to report and manage incidents and accidents. Risk to people were assessed, and management plans put in place to reduce risks. Staff followed infection control procedures.

People's needs were assessed following relevant guidance and law. People were supported to eat and drink enough and to meet their dietary and nutritional needs. Staff supported people to access healthcare services they needed. Staff were supported through induction, supervision and training to provide appropriate care to people.

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 support this practice. People and where appropriate their relatives consented to their care before they were delivered. Staff and the provider understood their responsibilities under the Mental Capacity Act 2005.

People were treated with dignity and respect. Relatives knew how to raise their concerns and complaints about the service. Care plans covered various areas of people's care and support. The registered manager checked and assessed the quality of service delivered to people. The provider worked in partnership with other organisations to develop and improve the service.

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

This service was registered with us on 11/03/2019 and this is the first inspection.

Why we inspected:

This was a planned inspection based on regulatory requirements to rate the service.

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 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 ●

Camsco 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. This inspection was planned to check whether the provider was meeting the legal requirements and regulations associated with the Act, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

Inspection team:

This inspection was carried out by a single inspector.

Service and service type:

This service is a domiciliary care agency. It provides personal care to people living in their own homes.

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 visit because it is small, and the registered manager is often out of the office. We needed to be sure that they would be in. The inspection site visit activity took place on 19 August 2021. We visited the office location to see the manager and to review care records and policies and procedures.

What we did:

Before the inspection, we reviewed information we had received 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. We used all of this information to plan our inspection.

During the inspection, we spoke with the registered manager and reviewed the care record of one person using the service, three staff files including recruitment, training and supervision; quality assurance records and other records relating to the management of the service. After the inspection, we spoke with one

relative and two members of staff to obtain their feedback about the service.

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 for this newly registered service. This key question has been rated Good. People were safe and protected from avoidable harm. Legal requirements were met.

Systems and processes to safeguard people from the risk of abuse.

- People were safeguarded from abuse. The relative we spoke with us, "[Loved one] is safe with them with staff. The staff take good care of them. They know how to keep them safe."
- The provider had systems and processes to safeguard people from abuse. There was a safeguarding policy and procedure in place. Record showed staff had been trained to identify the different types of abuse and neglect and what steps to follow to report any concerns. They knew to whistle-blow to external agencies if they needed to protect people.
- The registered manager demonstrated they understood their responsibilities to keep people safe, respond to allegations of abuse appropriately and notify CQC as required.

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

- People were protected from avoidable harm. The registered manager carried out comprehensive assessments covering risks associated with people's physical health conditions; risks of pressure sores, nutrition, moving and handling, health and safety of the environment, and medicine administration.
- Management plans were developed to guide staff to reduce identified risks to people. Appropriate equipment was available to transfer people if required. Management plan for safe handling included the number of staff required to carry out transfers safely and equipment needed. Equipment were also regularly checked to ensure they were functioning correctly and were safe for use.
- Risks management plans were reviewed regularly and updated regularly to reflect any changes in people's circumstances.
- Staff knew to report any concerns about people's care; including incidents and accidents to the registered manager who reviewed them and took appropriate actions to address incidents. For example. registered manager had updated one person's care plan and risk assessment following a recent fall. Staff were retrained on moving and handling and staffing levels increased to reduce the chances of further risks.

Staffing and recruitment

- People received the support they needed from staff. A relative told us, "There are regular carers and they know their job. They know [loved one] quite well now."
- There was sufficient staff available to meet people's needs as planned. The service had a team of staff covering shifts regularly and staff available to work as when required basis. The registered manager was also experienced and available to fill in gaps where required
- Staff were recruited safely. Staff had undergone appropriate checks before they started working with

people. Recruitment records contained two references, criminal record checks, employment history, proof of identity, and right to work in the UK.

Using medicines safely

- Staff supported people to take their medicines as required. Staff had received training in the safe medicine administration and management and their competency assessed.
- Care plan was in place that clearly stated the level of support people required from staff. For example, where collected the medicines pharmacy and how medicines are administered. Staff were clear on their roles.
- Medicines administration records [MAR] were completed with no gaps. The registered manager carried out regular audits to identify any issues or discrepancies with the MAR.

Preventing and controlling infection

- People were protected from the risk of infection. The service had an infection control policy and procedure in place and staff had completed training in this area.
- Staff used personal protective equipment (PPE) such as aprons and gloves appropriately. The registered manager carried out practice observations on staff to make sure they followed infection control procedures.

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. 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 registered manager assessed people's needs to establish what care and support they needed before delivering a service to them.
- The registered manager told us they reviewed referral documents to gather information about people's needs; and then they arranged a face-to-face assessment with people and their relatives where possible. Records showed and they relative we spoke with confirmed they were involved in the assessment process and care planning.
- Assessments covered people's medical conditions, physical and mental health; mobility, nutrition and social activities. The input of professionals was sought where required. Care plans were developed based on people's needs.

Staff support: induction, training, skills and experience.

- Staff were trained and supervised to be effective in their roles. Staff received an induction when they started in their roles. The registered manager worked with staff closely for a period to induct them in their roles and how to support the people they would be supporting. Record showed staff had completed training in areas relevant to their jobs.
- The registered manager used spot checks, observations and supervision to assess staff competencies and provide them with the support they needed to be effective in their roles.
- Staff told us they felt supported. The relative we spoke to told us staff knew their duties and how to deliver care to their loved one.

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

- Staff supported people to meet their nutritional needs. A relative we spoke with told us that staff encouraged them to eat and drink enough. Staff liaised with the people's relatives to provide food that met people's dietary. Staff followed people's dietary plan. For example, one person required their food in a moist due to risk of choking; staff knew about this and followed it.
- Staff knew to share any concerns that may arise about people's nutritional needs with the registered manager, people's relatives; and the registered manager involved relevant professionals as necessary to reduce risks.

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

- People were supported to meet their day to day healthcare needs where required. Records showed the registered manager had involved other healthcare professionals such as the community mental health team

and GP in meeting their physical and mental health needs.

- Staff worked with other services to ensure an effective joint working. They worked with another care provider to provide support to the person using the service. Staff knew actions to take to respond to medical and non-medical emergencies. They had contact details of people's relatives and other emergency services in the event they needed support. Staff knew to share relevant information about people such as their medical history, care and support needs, communication requirements, allergies, next of kin and GP details if people were being transferred to other services.

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. If the service wished to restrict the liberty of any person an application would have to be made to the Court of Protection. We checked whether the service was working within the principles of the MCA.

- Staff had received training in Mental Capacity Act (MCA) 2005, and they knew to obtain consent from people before undertaking any task or activities with them.
- Relative we spoke with told us they were involved, and their consent was sought before decisions were made about their loved one's care. The registered manager and staff understood their responsibilities under the MCA to ensure people's rights were protected.

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. People were supported and treated with dignity and respect; and involved as partners in their care.

Ensuring people are well treated and supported; equality and diversity; Supporting people to express their views and be involved in making decisions about their care

- Staff provided care and support to people in a compassionate and caring manner. The relative we spoke with told us, "The staff are caring and kind. They understand their behaviour and are compassionate towards them. They look after loved one well which we are happy about."
- Staff knew what people liked and disliked and how to support them. Care records detailed people's backgrounds, preferences, and how they wanted their care delivered. The relative told us staff knew how to communicate with their loved one and they understand their loved one non-verbal cues.
- The service ensured the staff team was regular and stable to ensure consistency and continuity. The relative told us this had helped staff develop positive working relationships with the person and has reduced their loved one's anxiety.
- A relative we spoke with told us that the registered manager and staff involved them and their loved one in planning their day to day care and support; and respected the choices and preferences. They commented, the registered manager visits us often and discusses the plan and any updates. We work well together to make sure loved one's care is right for them.
- Care records contained information about people's disability, culture and religion. Staff had received training in equality and diversity. They knew to respect people's individuality and differences. Staff supported people to have food which reflected their culture and preferences

Respecting and promoting people's privacy, dignity and independence

- People were treated with dignity and respect by staff. The relative we spoke with told us staff were respectful of loved one's dignity and privacy. Staff had received training in dignity in care and knew to maintain people's privacy, independence and dignity. The registered manager monitored how staff promoted people's dignity through spot checks and observation.

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. People's needs were met through good organisation and delivery.

Planning personalised care to meet people's needs, preferences, interests and give them choice and control

- People were supported in a way that met their individual needs and preference. People's care plans contained detailed information about their needs and how these would be met.
- Care plans covered people's personal care, nutrition, skin care, social activities, mobility/transfers and physical health needs. Information about people's background, communication needs, likes and dislikes, hobbies and interests were also detailed in their care plans.
- Daily care records showed staff supported people according to their needs. Care plans were reviewed and updated as required to reflect changes in people's care needs and circumstances.

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 registered manager told us that they could produce information in different formats such as large prints, easy read or in pictorial format if people required this to make information more accessible to them.
- Staff communicated with people in the way they understood. They used basic words and gestures to promote effective communication where necessary.

Improving care quality in response to complaints or concerns

- The service had a complaints procedure in place. People and their relatives received a copy when they first started using the service. The relative we spoke with confirmed they knew how to complain and how to escalate their concerns if necessary.
- Record showed the registered manager had addressed a recent complaint in line with their procedure and had resolved the matter.

End of life care and support

- At the time of our inspection, the service was not supporting anyone with end of life care. The registered manager had experience providing end of life care. Care plan documented people's advanced care wishes including where they preferred to be cared for.
- The registered manager knew how to involve other health professionals to meet people's needs when this was needed.

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. 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 met the needs of the people they supported. The relative we spoke with told us, "The staff have been good. Loved one is getting the care they need from the service. They are well supported."
- The service had procedures and processes in place to achieve positive outcomes for people. They followed the relevant guidance and laws to establish the service and to guide how they deliver care.
- Staff were trained in their roles and they told us the registered manager supported them to ensure the service delivered was good. One staff member told us, "The registered manager is friendly but does not tolerate bad practices. She always insists we do our jobs properly."

How the provider understands and acts on duty of candour responsibility; Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements.

- The registered manager and provider was a registered nurse and had previous experience of delivering care service to people. They understood their responsibilities under their CQC registration. They had submitted notifications of significant events as required. They understood their responsibility under the duty of candour regulation.
- The staff member we spoke with told us they felt supported in their role and had direction and leadership they needed from the registered manager. Staff were trained to provide effective care to people. Staff knew to share information, concerns and to report incidents appropriately.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Continuous learning and improving care.

- The registered manager sought feedback from people and their relatives about the service. The relative commented, "The service is brilliant. The registered manager is very responsive. She meets with us quite regularly to discuss the care. She listens and takes necessary steps to improve her care. Our views count and we are happy for that."
- The registered manager monitored the quality of service delivered through audits of daily care records, medicine administration records; and spot checks on staff.
- Records were accurate and up to date. Records were kept away securely in a locked cabinet in the office.

Working in partnership with others.

- The registered manager worked with the local authority commissioners to develop the service and meet the needs of people using it. We saw records which showed joint working. For example, they had discussed and put a plan in place following an incident.