

K.C. Carers Limited

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Inspection report

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Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service caring?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

About the service

K.C. Carers Limited is a domiciliary care agency that provides personal care to people in their own homes. At the time of the inspection they were supporting 40 people.

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

People were protected from the risk of abuse. Staff were kind caring and respectful of people's privacy and dignity.

People's risks were assessed regularly or as their needs changed. Staff understood how to mitigate people's known risks as care plans provided staff with guidance on how to provide safe care. People received their medicines safely.

There were enough skilled staff to meet people's needs. Staff were recruited using safe recruitment practices. Staff received training and supervision to carry out their roles.

The registered manager had implemented systems to assess, monitor and improve the safety and quality of the service. Lessons had been learned when things had gone wrong. They sought feedback from people using the service and used the information to improve the service.

People were protected from infection through infection control procedures. Staff had adequate supplies of personal protective equipment [PPE] and knew what PPE to use in specific circumstances. Staff were involved in regular testing for COVID-19.

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 and update:

The last rating for this service was Requires Improvement (published 07 February 2020) and there was a breach of three regulations. The provider completed an action plan after the last inspection to show what they would do and by when to improve. At this inspection the provider had made improvements and were no longer in breach of regulations.

Why we inspected

The inspection was prompted in part due to concerns received about leadership, management and oversight of the service. As a result, we undertook a focused inspection to review the key questions of safe, caring and well-led to examine those risks.

We reviewed the information we held about the service. No areas of concern were identified in the other key questions. We therefore did not inspect them. Ratings from previous comprehensive inspections for those key questions were used in calculating the overall rating at this inspection. The overall rating for the service has changed from requires improvement to good. This is based on the findings at this inspection.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for K.C.Carers Limited on our website at www.cqc.org.uk.

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?

Good ●

The service was safe.

Details are in our safe findings below.

Is the service caring?

Good ●

The service was caring.

Details are in our caring findings below.

Is the service well-led?

Good ●

The service was well-led.

Details are in our well-led findings below.

K.C. Carers Limited

Detailed findings

Background to this inspection

The inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 (the Act) as part of our regulatory functions. We checked whether the provider was meeting the legal requirements and regulations associated with the Act. We looked at the overall quality of the service and provided a rating for the service under the Care Act 2014.

Inspection team

This inspection was carried out by two inspectors.

Service and service type

K.C. Carers Limited is a domiciliary care agency. It provides personal care to people living in their own houses and flats.

The service had a manager registered with the Care Quality Commission. This means that both the provider and the registered manager 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 24 hours' notice of the inspection. This was because it is a small service and we needed to be sure that the provider or manager would be in the office to support the inspection. Inspection activity started on 18 May and ended on 21 May 2021. We visited the office location on 18 May 2021.

What we did before the inspection

We reviewed information we had received about the service. We sought feedback from the local authority and Healthwatch Northamptonshire, Healthwatch is an independent consumer champion that gathers and represents the views of the public about health and social care services in England. We used all this information to plan our inspection.

The provider was not asked to complete a provider information return prior to this inspection. This is information we require providers to send us to give some key information about the service, what the service

does 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 of this information to plan our inspection.

During the inspection

We spoke with 10 people who used the service and one relative about their experience of the care provided. We spoke with seven members of staff including the registered manager, two senior staff and four care staff.

We reviewed a range of records. This included three people's care records and multiple medication records. We looked at two staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including policies and procedures were reviewed.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at risk assessments.

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 requires improvement. At this inspection this key question has improved to the rating of Good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse; Staffing and recruitment

At the last inspection, the provider had failed to have sufficient systems and processes to ensure people were safeguarded from abuse and improper treatment. This was a breach of regulation 13 (Safeguarding service users from abuse and improper treatment) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 13

- People were protected from the risk of abuse. Staff demonstrated a good understanding of recognising the signs of abuse and how and where to report it. Staff knew how to escalate their concerns if they were unhappy with the provider's response. One member of staff told us, "I know I can go directly to the safeguarding team with anything that wasn't right."
- Staff had received training in and understood the provider's policies relating to the use of personal data and social media. The registered manager had systems to check staff complied with these policies.
- The registered manager had raised safeguarding concerns appropriately. They had carried out investigations and taken action to protect people from the risk of abuse.
- Staff were recruited safely. The provider had processes in place to ensure only suitable people were employed. Disclosure and Barring Service (DBS) checks were completed for all staff prior to them working with people. The DBS carry out a criminal record and barring check on individuals who intend to work with children and vulnerable adults, to help employers make safer recruitment decisions.
- There was enough skilled staff deployed to meet people's needs. One person told us, "There are two carers who come on each visit and they usually come together and are generally on time." One member of staff told us there were enough staff, they said, "We all support each other when people are off sick, we all pull together."
- Staff received training to meet people's specific care needs, for example, using hoists to safely support people with their mobility needs.

Assessing risk, safety monitoring and management

- People had their risks assessed and staff referred to people's care plans to know how to mitigate these known risks. Staff told us they could access this information easily. One staff member told us, "[The information] is all in the folders in the clients home, there is enough time to read them, you can also go into the office and look at files there."

- People's risk assessments were reviewed regularly or when their needs changed. Staff were updated with these changes. One person told us, "[Staff] always add to the care plan when something is needed to be recorded and I also see the carers writing in the folder every time."

Using medicines safely

- Medicines were managed safely. Staff had received training in administering medicines and had their competencies checked. Staff told us, "We get [medicines training] once a year at least online and, also have spot checks which covers medicines competency."
- Medicine administration records (MAR) charts were in place and completed appropriately. One relative told us, "[Staff] give [relative] tablets on each visit, it's all written on a sheet in the book. There have been no mistakes I know of."
- The registered manager had systems to check the medicines policies were being followed and people had received their medicines safely.

Preventing and controlling infection

- Staff received training in infection control and the registered manager had procedures to monitor staff were following the infection control policies. One member of staff told us, "We have done loads of COVID-19 training online and infection control, [the registered manager] makes sure you are stocked with PPE."
- Staff used personal protective equipment (PPE) effectively and safely. One person told us, "[Staff] come with masks, gloves and aprons on."
- The registered manager ensured staff were tested regularly for COVID-19 as per government guidance.

Learning lessons when things go wrong

- The registered manager used incidents and complaints to improve the service and reduced the risk of any reoccurrence. As a result, all areas of the service had been improved. Staff were informed of any changes to policy or procedure that had come about in response to learning from incidents.

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 requires improvement. At this inspection this key question has improved to the rating of good. This meant people were supported and treated with dignity and respect; and involved as partners in their care.

Respecting and promoting people's privacy, dignity and independence

At the last inspection people's privacy was not respected and their dignity was not maintained. This was a breach of regulation 10 (Dignity and respect) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 10.

- The registered manager ensured staff treated people with dignity and respect by training and supervising staff regularly and instilling a caring culture. They had implemented stringent policies and procedures for the use of social media and keeping people's information secure.
- People told us staff helped them to maintain their privacy and independence. One person said, "[Staff] always respect my privacy, for example, they ask me whether I would like them to wash certain areas of my body or can I do it myself." One relative told us, "[Staff] give [Name] privacy and are gentle with them."
- Staff understood the need for people's privacy and respected this. One member of staff told us, "Anything that happens in the person's home stays in that home, we do not go to other clients and discuss things. We only discuss things with the managers where there is a concern."
- People told us they received care from staff that were kind and caring. For example, one person told us, "My regular carer is lovely. None of the carers ever rush me. I never feel I am being hurried. They never talk about other people they visit when with me."
- People told us staff were respectful. One person said, "All of the carers do a good job and ask us. 'Are you comfortable?' 'What would you like for your breakfast? They always ask whether there is anything else we need before they leave.'"

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

- People had developed good relationships with staff. One person described how staff had ensured their relative had been given the opportunity to use a wheelchair. They told us, "[Staff] are nice and helpful. If I have any concerns, I can ask them anything. They helped by getting [Name] assessed. Now we are waiting for a wheelchair to be delivered."
- People's care plans included their preferences, choice and what was important to them. Staff told us this helped them to build a rapport with people. One person told us, "[Staff] do chat with me, all about our

families."

- People's religious and cultural needs were assessed and planned into care.
- People and their families were encouraged to be involved in the planning of their care.

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 requires improvement. At this inspection this key question has improved to the rating of good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people; Continuous learning and improving care

At the last inspection the registered manager had failed to maintain sufficient oversight of the service and systems to monitor service quality were ineffective. This was a breach of regulation 17 (Good governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 17.

- The registered manager had implemented new systems and policies to improve the culture of the service. They had worked with staff to successfully promote respect and dignity of all people using the service.
- Staff felt confident in discussing issues with the management team. One member of staff told us, "I feel I can always speak to them about anything really." Another member of staff described the positive culture by saying, "The company is family orientated, very supportive."
- The provider's audits and quality checks had identified areas for improvement. All the concerns from the previous inspection had been addressed, action plans had been completed which had resulted in improvements in all areas of the service. The registered manager was confident they now had systems to identify issues, learn from these and continually improve the service.
- People knew the names of the registered manager and senior staff and found them to be approachable. People felt confident in contacting the registered manager and office staff to ask for help. One person told us, "I do find them a good organisation, for example, we can ring if something happens to [Name] such as when they slip down in the chair, the carers come and sit them up."
- Policies and procedures had been updated and shared with staff. The registered manager ensured these policies were adhered to through regular checks.

How the provider understands and acts on the duty of candour, which is their legal responsibility to be open and honest with people when something goes wrong

- The registered manager had a good understanding of the duty of candour and the legal requirement. The management team had good relationships with family members and kept them updated on a regular basis including information on accidents or incidents.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Working in partnership with others

- People and their families were invited to give feedback on the service which the provider acted upon.
- The service worked in partnership with other professionals to ensure people were well supported such as GP's and physiotherapists.
- The registered manager had worked closely with the local authority to demonstrate the improvements in the service.
- People's equality characteristics were considered when sharing information, accessing care and activities.
- Staff had not had the opportunity to attend regular team meetings due to the pandemic, however, the registered manager ensured all staff were kept up to date with training, changes in policies and learning from incidents.