

Catherine Marr

Caring Companions

Inspection report

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Date of inspection visit:
14 January 2019
16 January 2019
18 January 2019

Date of publication:
20 February 2019

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:

Caring Companions is a small domiciliary care service that provides support and personal care to older people in their own homes within the St Helens area. At the time of our inspection the service was supporting three people with personal care.

What life is like for people using this service:

At the previous inspection the registered provider was in breach of regulation relating to governance. At that time they had no clear systems and processes in place to show that regular checks and reviews had taken place on records or staff observation. During this inspection, improvements had been made.

The registered manager had implemented new systems to record any checks that had been completed on people's care records, daily logs and medication administration records. They had also completed regular observations on staff competency to deliver effective person-centred care. Some staff observations had not been recorded, however staff confirmed that these were carried out on a regular basis. We made a recommendation in relation to this.

People told us they felt they received care in a safe way. Individual risks to people and the environment had been identified and assessed and measures put in place to manage them and minimise the risk of avoidable harm occurring. Staff showed a good understanding of their roles and responsibilities for keeping people safe from harm. Medicines were managed safely by trained staff who ensured that people received medicines at the right time.

Sufficient numbers of suitably qualified and skilled staff were deployed to meet people's individual needs. Staff had received a range of training and support to enable them to carry out their role safely. People told us they received the right care and support from staff who were well trained and competent at what they did.

Staff showed a genuine motivation to deliver care in a person-centred way based on people's preferences and likes. Staff treated people with kindness, compassion and respect and ensured that people's dignity was maintained at all times. People spoke positively about the care and support they received. People told us they received support from regular staff who knew them well. They told us staff always arrived on time and stayed the right amount of time.

People's needs and choices were assessed and planned for. Care plans identified intended outcomes for people and how they were to be met in a way they preferred. People received support to maintain good nutrition and hydration and their healthcare needs were understood and met.

Records relating to consent for care were accurately completed and people told us they were always offered choice and control over the care they received.

Care was delivered in a personalised way which was in line with information recorded in people's care plans. People and family members knew how to make a complaint and they were confident about complaining should they need to. They were confident that their complaint would be listened to and acted upon quickly.

The leadership of the service promoted person centred care and a positive culture within the staff team. People, family members and staff all described the registered manager as supportive and approachable. The registered manager showed a continued desire to improve on the service and displayed knowledge and understanding around the importance of working closely with other agencies and healthcare professionals where needed.

Rating at last inspection: Requires improvement (Report published 13 February 2018)

Why we inspected: This was a planned comprehensive inspection based on the rating from the previous inspection.

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 ●

This service was safe.

Details are in our Safe findings below.

Is the service effective?

Good ●

This service was effective.

Details are in our Effective findings below.

Is the service caring?

Good ●

This service was caring.

Details are in our Caring findings below.

Is the service responsive?

Good ●

This service was responsive.

Details are in our Responsive findings below.

Is the service well-led?

Good ●

This service was well-led.

Details are in our Well-led findings below.

Caring Companions

Detailed findings

Background to this inspection

The inspection:

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection checked whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, 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 conducted by one adult social care inspector on all days of the inspection.

Service and service type:

Caring Companions is a domiciliary care service providing support and personal care to people in their own homes.

The service had a manager registered with the Care Quality commission. This means 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 24 hours notice of the inspection visit because it is a small service and we needed to make sure that someone would be available.

The inspection site visit started on 14 January and ended on 18 January 2019. It included visits to people's homes and telephone calls to relatives. We visited the provider's office on 14 and 18 January to see the registered manager and to review care records and other records relevant to the quality monitoring of the service.

What we did:

Our planning took into account information we held about the service. This included information about incidents the provider must notify us about, such as abuse; and we looked at issues raised in complaints and how the service responded to them. We obtained information from the local authority commissioners and safeguarding team. We used all this information to plan our inspection.

During the inspection, we spoke with two people using the service and one family member to ask about their experience of care. We also spoke with the registered manager and two members of staff. We looked at two people's care records and a selection of other records including quality monitoring records, recruitment and training records for four staff and records of checks carried out on the premises and equipment.

Is the service safe?

Our findings

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

People were safe and protected from avoidable harm. Legal requirements were met.

Assessing risk and supporting people to stay safe from harm and abuse.

- People receiving support and family members told us they felt the service was safe. Comments included "I always feel safe with the staff," "Yes I feel safe [staff] are excellent. I had a fall a while back and pressed my care line and the [staff] came straight away" and "I feel confident that [relative] is safe, I know staff will look after her."
- Individual risks to people and the environment had been assessed and were managed appropriately. Care records provided clear information around identified risks in order for staff to keep people safe from avoidable harm.
- Only one person received support with medicines. Records showed they were managed safely by suitably trained staff.
- Staff had received safeguarding training and had access to relevant information and guidance when required. Staff understood what was meant by abuse and they were confident about how to report safeguarding concerns.
- The service maintained a record for any safeguarding incidents that may occur. No incidents had occurred since our previous inspection, however the registered manager was aware of their role and responsibility when recording and reporting safeguarding incidents.
- People had access to care call alarms to alert emergency services if there was a concern. The registered manager received notification when alarms had been pressed and attended people's homes to assist.
- People told us they could always contact the registered manager if they felt unsafe or had fallen and were confident they would attend to provide support.

Staffing and recruitment

- Sufficient numbers of suitably qualified and trained staff were deployed to meet people's needs. Staff were allocated calls that were within close walking distance to ensure that people were not left waiting. Staff told us they felt they had enough time to complete the calls in their rota.
- The amount of staff who attended people's homes was based on the person's individual needs.
- People were supported by the same staff who they were familiar with and who had a good understanding of how to meet their needs and keep them safe.
- Safe recruitment processes were being used in line with the recruitment policy to ensure that staff employed were safe to work with vulnerable people.

Preventing and controlling infection

- Staff had received training around preventing and controlling infection and had access to relevant guidance and information. They used personal protective equipment (PPE) and good hand washing techniques to minimise the spread of infection.

Learning lessons when things go wrong

- The service did not have a clear system in place to record any incidents or accidents that may occur. The registered manager told us very few incidents had occurred since the last inspection and any that had would be recorded in people's daily notes which they reviewed weekly. We discussed the importance of being able to effectively review incidents in order to look for patterns and trends and prevent incidents reoccurring.
- By the end of the inspection the registered manager had implemented a separate system for recording incidents and accidents; during the time between our visits the registered manager had identified an increase in a person's care needs and had completed appropriate referrals to health professionals.

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

People's outcomes were consistently good, and people's feedback confirmed this.

Staff skills, knowledge and experience

- During the previous inspection we identified that staff had not completed all training relevant to their role. A recommendation had been made to ensure all staff received relevant training.
- Staff had now received all training relevant to their role. In addition to completing relevant training, the registered manager had requested that all staff complete the Care Certificate workbook. This is a set of fundamental standards health care professionals are expected to complete when supporting people in health and social care settings.
- Staff were competent, knowledgeable and carried out their roles effectively.
- Staff felt supported in their role by the registered manager.
- People and family members told us they felt staff had the skills and knowledge to provide the right support. Comments included "Yes the [staff] seem to know what they are doing. They do all the things I need," "The [staff] are great, they always do things right, I have nothing to complain about" and "All staff that visit [relative] seem to know what they are doing, I don't have any concerns."

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

- Care and support was planned, delivered and monitored in line with people's individual assessed needs.
- Systems were in place to assess people's needs and choices in line with legislation and best practice.
- Assessments were completed prior to people receiving support to ensure the service and staff could meet people's needs and provide effective support.
- Assessments and care plans included expected outcomes for people based on their needs and choices.
- Assessments were obtained from social care professionals and used to help plan effective care for people.
- Staff applied learning effectively in line with best practice. Staff knew people well and how best to meet their needs.

Supporting people to eat and drink enough with choice in a balanced diet

- Care records documented when people required support with preparing food and drinks.
- People and family members told us, and observations confirmed, that staff supported them to prepare food and would ensure that drinks were left within reach between calls.
- Nobody receiving support had any identified risks associated with poor nutrition and swallowing difficulties. However the registered manager was aware of any action they should take if risks were identified.

Supporting people to live healthier lives, access healthcare services and support

- Where people received additional support from healthcare professionals this was recorded within their care records.

- The registered manager and staff were aware of the processes they should follow if a person required support from any health care professionals.
- People were supported by staff to attend medical appointments when 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 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 with appropriate legal authority. People living in their homes can only be deprived of their liberty through a Court of Protection order.

We checked whether the service was working within the principles of the MCA, whether any restrictions on people's liberty had been authorised and whether any conditions on such authorisations were being met.

- At the time of our inspection no one receiving support was subject to any restrictions under Court of Protection.
- The registered manager and staff showed a basic awareness and understanding of the MCA.
- People's consent had been sought by the registered manager before care and support was provided. Where people were unable to consent, relevant other's provided consent on their behalf; such as those who held lasting power of attorney.
- People told us they were always offered choice and control over the care they received.

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

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

- People told us, and family members confirmed, that they were treated with kindness and were positive about the caring attitudes of staff. Comments included "[Staff] are brilliant, I couldn't ask for better, they do everything I ask, nothing is too much trouble. Really caring and have a good natter. They are excellent, I have no other words" and "Really nice staff, I get on really well with them we chat about everything. They are very nice and kind and do anything I ask, they even go to the shops if I need anything."
- Staff knew people well and displayed positive, warm and familiar relationships with the people they interacted with.
- Staff understood and supported people's communication needs and choices. Staff maintained eye contact and listened patiently and carefully when speaking with people to ensure their needs were understood and met.
- People, along with family members, had been given the opportunity to share information about their life history, likes, dislikes and preferences. Staff used this information as well as positive interaction, to get to know people and engage them in meaningful conversations.

Respecting and promoting people's privacy, dignity and independence

- Staff treated people with dignity and respect whilst providing care and support.
- People's right to privacy and confidentiality was respected. Staff ensured they delivered personal care to people in private. Staff knocked on doors and waited for a response before entering people's homes, bedrooms and bathrooms.
- People told us they always felt comfortable when staff supported them with personal care. Comments included "[Staff] bath me every morning, I feel great. They always make me feel comfortable and they always knock before they come into the bathroom" and "I always feel comfortable with them, they never make me feel embarrassed at all even when helping me with a wash."
- Staff ensured that people's confidentiality was maintained.
- People told us they were given choice and control over their day to day lives and supported to maintain their independence wherever possible. One person told us "I like to do things for myself but if I can't staff will help me."

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

- People and family members were encouraged share their views about the care they received with regular reviews and surveys; reviews were completed over the phone and in person.
- People and family members told us they were confident in expressing their views about the care and support provided by staff. Family members confirmed they had been involved in the decisions made about a

relative's care.

Is the service responsive?

Our findings

Responsive – this means we looked for evidence that services met people's needs

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

Personalised Care; accessible information, choices; preferences and relationships

- People's individual care needs had been identified. Care plans had been developed with the involvement of the person and their family members where appropriate.
- Care plans were person centred; they took account of people's likes, dislikes, wishes and preferences in relation to their daily routines.
- Staff had access to information about people's care needs; care plans detailed all tasks required for each visit and ensured that people received care that was person centred and appropriate to their needs.
- Staff completed a daily record at each visit to ensure that any concerns or identified changes were recorded. This ensured that staff had access to relevant and up-to-date information.
- People told us they received care and support from regular staff who knew their routines well. Comments included "I always have the same [staff] which makes it easier as I know who will be tuning up" and "I get four visits a day and it's always the same staff."
- The service recorded and shared information relating to people's communication needs as required by the Accessible Information Standards; for example where people were identified as having hearing difficulties.
- People and their family members told us staff were always on time and stayed the allocated amount of time as stated within their care plans. Comments included "The [staff] are always on time and if they are going to be late they always ring to let me know," "No issues at all with the times, [staff] always turn up when they are meant to and stay the right amount of time" and "[Relative] has never complained of staff not turning up or being late, I know they ring her to let her know if there is a problem and they are running a bit late but that rarely happens."

Improving care quality in response to complaints or concerns

- People and family members knew how to provide feedback to the registered manager about their experiences of care; the service provided a range of ways to do this through care review meetings and regular surveys.
- People and family members were given information about how to make a complaint and were confident that any complaints they made would be listened to and acted upon in an open and transparent way. One person told us "If I had any issues I would just speak to [manager], I know they would sort it straight away."
- Complaints that were made had been dealt with appropriately by the registered manager and where required were used as an opportunity to improve the service.

End of life care and support

- No person using the service at the time of the inspection was receiving end of life 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

The service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Continuous learning and improving care

- During the previous inspection the registered provider was in breach of regulation in relation to governance. This was because they had no formal systems to record when reviews or audits took place, or when supervisions, appraisals and observations of staff had taken place.
- On day one of this inspection the registered manager told us they addressed the previous issue by ensuring they signed people's care records, daily records and medicine administration records on a regular basis to show they had been reviewed. However they still had not formal system to show when issues had been identified and any action taken to address them. They also had no formal systems to show that supervisions or staff observations had been completed. By the end of the inspection, the registered manager had implemented a clear system to record any reviews or checks they completed.
- The registered manager carried out 'spot check observations' on staff to ensure they were delivering the right care to people. Some records had not been completed, however staff confirmed that these happened regularly.

We recommend the registered provider looks at ways to ensure that effective systems are in place to record all checks and observations completed on staff.

- Due to the small size of the service, the registered manager had regular oversight of the care being provided and the records complete by staff; this meant that any issues identified could be addressed straight away.
- Staff felt confident they would be supported with any learning or development needs or wishes and described a culture of learning.

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

- The registered manager was also the registered provider and had been in post since the service opened.
- The registered manager was clear about their role and responsibilities and they had a good understanding of regulatory requirements. They had notified CQC when it was required of events and incidents which occurred at the service. The rating from the previous inspection was prominently displayed at the service and on the providers website as required by law.
- People and family members were confident in the leadership of the service and told us they had regular contact with the registered manager. Comments included "I see [manager] all the time, she always checks that everything is okay and if it isn't she sorts it straight away" and "[Manager] is always here, she makes sure I am okay and I know that if there is a problem it will get fixed."

Planning and promoting person-centred, high-quality care and support; and how the provider understands and acts on duty of candour responsibility

- The registered manager promoted a culture of person-centred care by engaging with everyone using the service and their family members. People and family members felt listened to and involved in the care provided.
- Staff understood the service's vision and felt respected, valued and well supported. They told us they felt valued and trusted by the registered manager.

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

- The service involved people and their families through regular reviews and conversations to allow them to put forward their views about the service.
- Staff were encouraged to share their views about the service through regular meetings; staff told us they felt well supported, valued and trusted by the registered manager.
- People being supported by the service did not require involvement from many partner agencies, however the registered manager was aware of the need to work closely with other agencies to ensure good outcomes for people.