

3 County Care Limited

3 County Care

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

3 County Care is a domiciliary care agency that provides personal care to people in their own homes. It provides a service to people who have dementia, learning disabilities or autistic spectrum disorder, mental health, physical disability, as well as older people.

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 the time of our inspection the service was providing personal care to three people.

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

People were protected from the risks of abuse and relatives felt reassured with the staff providing their support and care. The registered manager had the knowledge to identify safeguarding concerns and would deal with them appropriately. Risks to people's personal safety had been assessed and plans were in place to minimise those risks. Staff recruitment and staffing levels supported people to stay safe while living as independent a life as possible. The registered manager scheduled visits so the same staff went to see people to maintain continuity of care and support. People were informed about the changes to their visits as necessary. The service did not support anyone with medicine at the time of inspection.

We have recommended that future ongoing staff training be updated in line with the latest best practice guidelines for social care staff.

People received effective care and support from staff who knew them well and were well trained. The staff monitored people's health and wellbeing and took appropriate action when required to address concerns. People's rights to make their own decisions were protected. 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.

People were treated with care, respect, kindness and their dignity was upheld. This was confirmed by people's relatives who provided feedback. People and relatives were consulted about their care and support and could change how things were done if they wanted to. People's diverse needs were identified and met and their right to confidentiality was protected.

People received care and support that was personalised to meet their individual needs. The registered manager and staff worked well together for the benefit of people and were focused on the needs of the people using the service.

People benefitted from staff who were happy in their work and felt well managed and supported. The registered manager encouraged feedback from people and families, which they would use to make improvements to the service and protect people against the risks of receiving unsafe and inappropriate care and treatment.

The registered manager had oversight in the monitoring of the running of the service, the quality of the service being delivered and took actions promptly to address any issues. The registered manager praised the staff team for their hard work and appreciated their contribution to ensure people received the best care and support.

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 24 May 2017. The service was dormant from then until September 2019. This is the first inspection after the dormancy ended.

Why we inspected

This was a first planned inspection based on the registration date and the end of dormancy.

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 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.

3 County Care

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 one inspector and was announced.

Service and service type

This service 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 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. This was because it is a domiciliary care agency and we needed to be sure that the provider or registered manager would be in the office to support the inspection. We visited the office location on 3 February 2020.

What we did before the inspection

Prior to the inspection we looked at all the information we had collected about the service including notifications the registered manager had sent us. A notification is information about important events which the service is required to tell us about by law. 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 the registered manager and reviewed a range of records. These included three people's care records. We also looked at a variety of records relating to the management of the service, including quality assurance, recruitment information for three staff, incidents and accidents, supervision, spot checks and observations, policies and procedures.

After the inspection

We received feedback from three relatives and three staff members. We looked at further training data, policies and recruitment information for three staff members sent to us after the inspection. We sought feedback from the local authority and professionals who work with the service and received one response.

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. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- Relatives agreed their family members were safe with staff and liked the staff who supported them.
- The registered manager understood their responsibilities in regard to safeguarding people who use the service and reporting concerns to external professionals accordingly such as the local authority, police and the Care Quality Commission.
- Staff were aware of how to recognise abuse and protect people from the risk of abuse.
- Staff knew how to report concerns and were confident the registered manager would act on any concerns reported to ensure people's safety.

Assessing risk, safety monitoring and management

- The registered manager and staff assessed and reviewed the risks to people's personal safety and put plans in place to minimise these risks.
- People's support plans had information and guidelines to help staff provide care in a safe and person-centred way, based on people's needs and the support they required.
- Some risk management plans could have been more detailed to ensure staff had guidance to mitigate the risks. For example, where people had someone to support them other than staff, to consider any risks and mitigation if they could not attend the person. As part of the care plan, the service carried out a health and safety assessment of the environment to ensure the person, their family and staff were safe while carrying on the regulated activity. Some assessments were missing some details and dates.
- We discussed the risk assessments, prevention measures and care plans with the registered manager who agreed with our feedback regarding their files. They took action to review and to ensure relevant and important guidance was easy to find so that people received safe and effective support.
- One professional added, "Yes, the company are currently assisting a service user on my case load, her mood fluctuates, which increases risks, the carer's, with the service user's permission, keep me informed regarding increased risks."
- The service had business continuity plans to ensure the service could continue in the event of an emergency. There was an on-call system in place for staff should they need help and advice and staff confirmed this.

Staffing and recruitment

- The registered manager followed recruitment procedures to ensure people were supported by staff who were of good character, suitable for their role and had appropriate experience. We found minor queries which we discussed with the registered manager who addressed them promptly and provided us with information.

- The registered manager provided further information on how they changed some of the forms to ensure all required recruitment information was gathered when new staff were recruited in future.
- The registered manager determined the number of care packages according to staff numbers and the needs of the people using the service. They allocated the same staff to the same people as much as possible to ensure there was continuity in meeting people's needs.
- The registered manager monitored the staff rota of visits regularly. They also reviewed the staff capacity and how many care packages could be taken on.
- Relatives confirmed staff arrived and left at the right time and completed all the care and support needed.
- One professional added, "Yes, the service user on my case load talks highly of the company and how they adapt to her needs."
- The staff confirmed they had time to complete all of the care and support required by the person's care plan at each visit. Where needed, the registered manager also covered absences to help staff and people.

Using medicines safely

- At the time of our inspection the service did not support anyone with medicines.
- The registered manager explained how they could support people with medicines and there was a procedure for the management of medicines in place.
- The training matrix record confirmed staff had received training in handling medicines online. The registered manager said if they started providing support with medicine, staff would have a more in-depth training and would ensure they were assessed as competent before administering medicine.

Preventing and controlling infection

- Staff were provided with and used personal protective equipment to prevent the spread of infection. Relatives confirmed this and said staff wore the protective equipment while supporting them.
- Staff were trained in infection control and followed the provider's policies and procedures on this.

Learning lessons when things go wrong

- There was a system in place for recording accidents and incidents. There had not been any incidents or accidents.
- The registered manager said if something happened it would be investigated and they would ensure people were safe. The issue would then be discussed within the team and ways to prevent it recurring would be identified and implemented.

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 care needs were assessed to identify the support they required and to ensure that the service was meeting these individual needs.
- Each care plan was based on a full assessment and it described people's personal likes and preferences, their interests, as well as physical and emotional needs.
- Care plans also included information on how people wished to be supported and to ensure they were able to live life to their full potential and as they chose.

Staff support: induction, training, skills and experience

- People received care from staff that had the necessary knowledge, skills and experience to perform their roles. Relatives thought staff had the training and skills they needed when supporting them.
- Staff felt they received training that equipped them with the knowledge they needed to support people.
- The registered manager had a system for monitoring staff training to ensure training was up to date including spot checks to monitor staff member's practice and performance. We noted to the registered manager to ensure basic life support and/or first aid training included a classroom based training session as well.

We recommend the provider reviews and brings the staff training provision in line with the current best practice guidance on ongoing training for social care staff.

- Staff felt they received the training they needed to enable them to meet people's needs, choices and preferences. Staff felt supported by the registered manager. Staff members received feedback about their performance and discussed training needs during one to one supervision.

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

- People were supported with their meals and drinks as part of their care package. Where someone needed help with eating or encouragement with drinking and having a balanced diet, guidance would be provided to staff.
- If people were not eating well staff would highlight that to the person's relative, the staff member or the registered manager and advice would be sought from a health professional if necessary.

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 remain as healthy as possible. Care plans covered aspects of care including

health and well-being to meet people's individual needs.

- People's changing needs were monitored appropriately to ensure their health needs were responded to promptly.
- The service communicated with the families, GPs, local authority, community nurses and occupational therapist for guidance and support. The registered manager and the staff were knowledgeable and informed about people's health and wellbeing. The care for people's health and wellbeing was proactive and organised well. People would be referred to various health professionals to address any health or changing needs.
- One professional added, "Yes, as stated above, the company keep me informed of both her mental health and physical health and have at time collected medication from the pharmacy on the service users behalf, thus ensuring ongoing healthcare support."

Ensuring consent to care and treatment in line with law and guidance

The Mental Capacity Act 2005 (MCA) provides a legal framework for making particular decisions on behalf of people who may lack the mental capacity to do so for themselves. The Act requires that, as far as possible, people make their own decisions and are helped to do so when needed. When they lack mental capacity to take particular decisions, any made on their behalf must be in their best interests and as least restrictive as possible.

People can only be deprived of their liberty to receive care and treatment when this is in their best interests and legally authorised under the MCA. When people receive care and treatment in their own homes an application must be made to the Court of Protection for them to authorise people to be deprived of their liberty.

We checked whether the service was working within the principles of the MCA.

- Staff understood the need to assess people's capacity to help them make decisions. People's rights were protected because the staff acted in accordance with the MCA.
- People's rights to make their own decisions, where possible, were protected.
- Relatives felt the staff were polite and respectful towards their family members and respected their decisions.

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

- Relatives felt their family members were treated well by the staff and the registered manager.
- The registered manager placed importance on ensuring continuous support to people from regular staff. People, relatives and staff knew each other well and had well established relationships.
- The registered manager and staff regularly checked during the visits, whether people were happy with their support and staff listened to any issues or questions.
- Staff delivered care and support that was caring and person-centred and which had a positive effect on people. Relatives said, "They are excellent. They always talk to [family member] in a jolly and cheerful way" and "Very caring and lovely to [family member]."
- Staff understood the importance of treating people respectfully. The staff team made sure that people received care from familiar, consistent care staff.
- People's care was not rushed, enabling staff to spend quality time with them.

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

- People and those important to them were encouraged and involved in making sure they received the care and support they wanted.
- People's records included information about their personal circumstances and how they wished to be supported. Staff used this information to learn about people and engage with them in decisions about their care and support.

Respecting and promoting people's privacy, dignity and independence

- Relatives agreed staff respected their family members' dignity and privacy and made them feel comfortable at all times. Relatives said, "I'm really delighted with the care [family member] gets" and "We are very happy with the service provided."
- Staff ensured people were fully involved with their care, promoting independence whenever possible. They agreed the care and support they provided helped people who use this service be as independent as they can be.
- Any private and confidential information relating to the care and treatment of people was kept in their home in a chosen place. This information was also kept securely in the office.

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 received individualised care and support they needed which supported their cultural identities and preferences set out in their care plan. Relatives agreed the care and support was consistent.
- People and relatives were involved in the care planning process. The service was flexible to adjust to people's needs when necessary.
- Information had been sought from the person, their relatives and other professionals involved in their care where necessary. This information was then used to compile the plan of care and reviewed when needed.
- We found and spoke with the registered manager about the fact that whilst care plans included details of people's individual support, some information could be more specific to the person. For example, describing parts of their routine or specific conditions and then ways to support and help them.
- Staff recorded care and support provided at each visit that helped them monitor people's needs and respond to any changes in a timely manner.

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 service did not support people who were publicly funded.
- The service identified people's information and communication needs by assessing them and recording this in their care plans.
- Staff were aware how to help people communicate their wishes if they had communication needs.

Improving care quality in response to complaints or concerns

- The registered manager took complaints and concerns seriously and said they would use them as an opportunity to improve the service and identify any trends.
- There had been no complaints since the service started providing care and support.
- The registered manager said they would pass compliments to the staff to let them know their work was appreciated.
- Relatives could approach the registered manager or one of the staff if they had any issues.
- The staff felt they could approach the registered manager with any concerns should they need to, and it would be addressed.

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.

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

- 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 safety and quality of care provided.
- There had been no events that required a notification but the registered manager understood when to inform CQC of events. Notifications are events the registered person is required by law to inform us of.
- The registered manager had an oversight of the service provided and ensured people received the care and support they needed.
- The registered manager said they did not use any particular quality assurance system as the service size was so small. However, when they start increasing the care packages, specific quality assurance systems would be implemented.
- The registered manager also planned to put in place an electronic care planning system to help staff record care provided and make monitoring of it easier.
- The registered manager said they had not had any missed visits. The service, people and relatives communicated with each other should there be any issues with visits. The registered manager worked alongside staff when needed, this also helped them observe practice and pick up any issues promptly.

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 was clear about their role. We discussed duty of candour and what incidents were required to be notified to the Care Quality Commission. The provider had a policy that set out the actions staff should take in situations where the duty of candour would apply.

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

- The registered manager and staff demonstrated a shared responsibility for promoting and supporting people's wellbeing, independence and safety. There was a 'whole team approach' and supportive culture within the team. One staff member said, "One of the joys of working at 3 County Care is knowing that you have a manager who cares about both his clients and employee's welfare."
- Relatives agreed the service was managed well. One relative added, "Remarkable company and very efficient staff. Have looked after [my family member] ...and I wouldn't want to change any aspect." Both staff and relatives agreed they would recommend this service to other people to use.
- The registered manager praised the staff team saying, "Yes, the staff work well together. They are very nice

staff, very supportive to us and we are to them. It is a two-way process. Staff do care for people, I'm very lucky and they want to do the job."

- The registered manager was accessible and approachable and would deal effectively with any concerns raised.
- Staff felt they could approach the registered manager with any concerns. Staff were positive about the support from the registered manager. Staff said, "I am happy and treated well by my manager and staff" and "I have worked for many care companies, and can say hand on heart this is the best company I have worked for, there is always support when we need and all staff, senior or otherwise, are there for you should you need. I would recommend this company to my family and friends and have done in the past."

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

- The registered manager had not carried out any specific surveys at the time of this inspection. However, he regularly kept in touch with relatives, people and staff to gain their views and feedback.
- The registered manager communicated on a daily basis with the staff team to ensure all of them were aware of any issues, important information related to the service, actions to take and to pass on positive feedback.

Working in partnership with others

- The registered manager had established partnership working with outside organisations. Where necessary, external health and social care professionals had been consulted or kept up to date with developments. One professional added, "From my experience with working with the company they have demonstrate good management, responding to the changing needs of the service user.
- The service had good links with the local community and the provider worked in partnership with other agencies to improve people's wellbeing.