

Northants Community Care Limited

# Northants Community Care Limited

## Inspection report

21-25  
Sanders Road, Finedon Road Industrial Estate  
Wellingborough  
NN8 4NL

Tel: 01933223799

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## Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service well-led?

Good ●

# Summary of findings

## Overall summary

### About the service

Northants Community Care Ltd is a domiciliary care agency providing personal care to people with health and social care needs 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 the time of the inspection 13 people received personal care support.

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

The provider's systems and processes did not always effectively monitor the quality of the service provided. Audits undertaken to monitor the quality of care provided were not always in place to identify issues needing improvement, such as the reliability of the service.

Systems and processes were in place to support people's safety. People were supported by staff who had undergone a safe recruitment process. People and family members spoke of the friendliness and caring attitude of staff and management.

There were sufficient staff to meet people's needs. People told us they felt safe and staff ensured they were safeguarded from harm. Staff followed the provider's policy and procedure for infection prevention and control.

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.

Staff were supported through ongoing monitoring and good communication, which ensured information was shared in a timely manner to support in the delivery of personal care.

For more details, please see the full report which is on the CQC website at [www.cqc.org.uk](http://www.cqc.org.uk)

### Rating at last inspection and update

This service was registered with us on 5 December 2014 and this is the 5th inspection.

The last rating for this service was Good, published on 4 June 2019.

### Why we inspected

The inspection was prompted by concerns we received that safe care was not being provided to a person. As a result, we undertook a focused inspection to review the key questions of safe and well-led only.

For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating.

The overall rating for the service has remained good based on the findings of this inspection.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Northants Community Care Ltd on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

#### Follow up

We will continue to monitor information we receive about the service, which will help inform when we next inspect.

## The five questions we ask about services and what we found

We always ask the following five questions of services.

### **Is the service safe?**

**Good** ●

The service was safe.

Details are in our safe findings below.

### **Is the service well-led?**

**Good** ●

The service was not always well-led.

Details are in our well-led findings below.

# Northants Community Care Limited

## **Detailed findings**

## Background to this inspection

### Background to this inspection

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

### Inspection team

This inspection was carried out by 1 inspector.

### Service and service type

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

### Registered manager

This provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations. At the time of our inspection there was a registered manager in post.

### Notice of inspection

We gave the service 2 days' notice of the inspection. This was because it is a small service and we needed to be sure that the registered manager would be in the office to support the inspection. We also gave time for the registered manager to send us inspection information, so we did not have to spend an extended amount of time in the office of the service.

Inspection activity started on 13 December 2022 and ended 14 December 2022. We visited the office location on 14 December 2022.

#### What we did before the inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority and Healthwatch. 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 the information the provider sent us in the provider information return (PIR). This is information providers are required to send us annually with key information about their service, what they do well, and improvements they plan to make. We used all this information to plan our inspection.

#### During the inspection

We spoke with 3 people who used the service about their experience of the care provided and 3 relatives. We also spoke with 3 care staff, the nominated individual who is also the provider, and the registered manager.

We reviewed a range of records. This included 3 care plans. We looked at 3 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 also reviewed.

# Is the service safe?

## Our findings

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

At our last inspection we rated this key question good. The rating for this key question has remained good. This meant people were safe and protected from avoidable harm.

### Staffing and recruitment

- Staff were recruited safely. Recruitment systems for current staff showed evidence of good character and criminal records checks had been completed. Disclosure and Barring Service (DBS) checks provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.
- Care plans identified the number of staff required to deliver care safely. People and relatives told us the required number of staff were always sent to provide personal care.
- The majority of people and relatives said care calls were timely. Two relatives said that on some occasions when staff did not arrive on time, they had not received a call to inform them when staff would be available. The registered manager followed this up with people and relatives by reviewing the care provided. Action was taken to ensure calls were timely in the future.
- Some people did not have specific call times. There was no evidence in place that they had agreed to flexible call times. The registered manager said this would be discussed with these people to see whether they wanted specific times to be scheduled.

### Systems and processes to safeguard people from the risk of abuse:

- People were protected from the risk of abuse. People and relatives said staff followed safe working practices and they felt there was good protection from the risk of abuse. One person said, "There has never been a problem with staff. They are very careful with me."
- Staff understood how to safeguard people. They were aware of reporting concerns to the registered manager if abuse was suspected or alleged. They knew how to report to a relevant outside agency if no action was taken by management. Staff had confidence that management would act if there were any concerns about people's safety.
- The registered manager was aware of their duty to report any safeguarding concerns to the local authority safeguarding team, and had done this consistently.

### Assessing risk, safety monitoring and management

- People were protected from risks associated with their care and support. Risk assessments were in place for a range of issues including assisting people with continence and pressure area needs.
- Environmental risk assessments were completed. The assessments identified risks in people's homes, for example, tripping hazards. This enabled staff to take action to reduce and mitigate the chance of harm to people.

### Preventing and controlling infection

- People were protected from the risk of infection. The majority of feedback confirmed staff wore personal protective equipment (PPE) during the COVID-19 pandemic, which protected people from the risk of infection. The registered manager took action and confirmed they had immediately followed up an issue of negative feedback received from one person.
- Staff told us they had received training from the registered manager in infection control, including COVID-19 and putting on and taking off PPE. This was supported by the staff training matrix of the service. Staff said there was always enough PPE available to ensure people were protected from infection.

#### Learning lessons when things go wrong

- Processes were in place for the reporting and follow up of accidents or incidents.
- The registered manager showed that a lesson had been learnt in relation to the care of a person with mental health needs.

#### Using medicines safely

- Records confirmed people were provided with their medicines.
- Staff told us they received training in medicine administration from the registered manager. They said their competency was tested to ensure they knew how to supply medicine to people safely. The training was evidenced in the staff training matrix.
- The medicine policy was detailed and covered all issues of the safe administration of medicines. It supported people to receive their medicines in the way they preferred.

# 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 good. At this inspection this key question has remained the same. This meant the service was consistently managed and well-led.

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

- Audits and checks were carried out to check the service met people's needs. These included checks on care, care records and staff training. Issues were not identified in audits with regard to late untimely care calls. Although there was no evidence this impacted on personal care provided, this meant the opportunity to learn lessons may have been missed. The registered manager took action after the inspection day to ensure this issue was acted on.
- Staff were monitored by the registered manager through spot checks, working with staff and staff supervision.
- Surveys were provided to people or their relatives on an annual basis. These showed positive satisfaction with the service.
- The registered manager understood their role and the needs of their staff team. Staff understood their responsibilities, and who to report to if they had concerns and needed help.

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

- The registered manager promoted a positive culture that was inclusive and empowering to achieve good outcomes for people. This was successful for people and the relatives we spoke with. One person said, "Staff are very caring and friendly. I can get in touch with the office easily and there is always a positive response to my query."
- Staff felt fully supported. They said whenever they had an issue, management always responded swiftly and positively. One staff member said, "This is the best company I have worked for. They are always available and will help me if I need to change my shifts." Staff told us they were thanked for the care they provided to people. We saw this was the case in minutes of staff meetings.

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 aware of the duty of candour. If mistakes were made, they had a duty to be open and honest, issue an apology and take any necessary action.
- The registered manager understood information sharing requirements. They knew that when concerns had been identified, notifications should be sent to the CQC as required by law. There had not been a need to do this to date.

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

#### characteristics

- Feedback was sought from people and their relatives in reviews of care. This showed they were satisfied that care needs had been met. There were a number of compliments of the care that people had received. One relative had stated, "Just wanted to thank you again for the brilliant care and support you have given."
- Staff received supervision. Supervision records were detailed showing relevant issues were discussed such as people's care, staff training and whether staff had any concerns about their roles.
- People told us they were treated fairly and with respect. They said they did not have any cultural or religious requirements. No one else had been identified to have any other specific requirements.

#### Working in partnership with others

- The service worked in partnership with others.
- The registered manager was aware of the need to work with health professionals to ensure people's needs were met. There was also information in place for management to liaise with medical professionals when needed. For example, the district nurse if people had sore skin, to try to avoid pressure sores from developing.
- Staff understood they needed to inform the registered manager and people's families if people's health or wellbeing deteriorated or they had a fall or accident.
- The registered manager and the nominated individual were receptive to feedback when we discussed the inspection findings. The service worked cooperatively with the local authority when needed to investigate safeguarding incidents, and with other health and social care professionals whenever this was needed.