

Good Companions (Cumbria) Limited

# Good Companions Care at Home Agency

## Inspection report

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Tel: 01228594153

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26 April 2021

28 April 2021

05 May 2021

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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

Good Companions Care at Home Agency is a domiciliary care service providing personal nursing care to people who live in their own homes. At the time of this inspection 72 people were using the service.

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.

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

People and relatives were very positive about the service they received. They told us they received "helpful and friendly" support from "kind and caring" staff.

People said they felt safe and well-supported during the COVID-19 pandemic. They described how staff always wore the correct PPE, washed their hands regularly and followed all the rules and guidelines.

People's needs and risks to their well-being were assessed and recorded. The quality and detail of the care records was inconsistent. We have made a recommendation about this.

People described staff as "good at their jobs". People said they were fully involved in managing their own care service. They told us all staff, including office staff, treated them like "part of the family".

People were supported to have maximum choice and control of their lives and staff assisted them in the least restrictive way possible and in their best interests; the policies and systems in the service upheld this practice.

Staff understood how to report any concerns and felt these would be listened to. Some people were assisted with their medicines and there were clear systems to manage this.

At the time of this inspection there were enough staff employed to provide the service. Recently there had been a significant gap in staffing but the provider had worked with commissioners to manage the situation until new staff could be appointed.

People and staff said the management team were open, approachable and always contactable.

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

The last rating for this service was good (published October 2017).

### Why we inspected

We received concerns in relation to staffing levels, staff training and how the service was managed. As a result, we undertook a focused inspection to review the key questions of safe and well-led only.

We found no evidence during this inspection that people were at risk of harm from this concern. Please see the safe and well-led sections of this full report.

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.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Good Companions Care at Home Agency 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 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 well-led?**

**Good** ●

The service was well-led.

Details are in our well-led findings below.

# Good Companions Care at Home Agency

## **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.

As part of this inspection we looked at the infection control and prevention measures in place. This was conducted so we can understand the preparedness of the service in preventing or managing an infection outbreak, and to identify good practice we can share with other services.

#### Inspection team

This inspection was carried out by one inspector and an Expert by Experience. An Expert by Experience is a person who has personal experience of using or caring for someone who uses this type of care service.

#### 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

This inspection was unannounced.

Inspection activity started on 26 April 2021 and ended on 5 May 2021. We visited the office location on 28 April 2021.

### 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 professionals who work with the service. 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.

### During the inspection

We spoke with 14 people who used the service and two relatives about their experience of the care provided. We contacted 16 members of staff including support workers and care co-ordinators. We spoke with the registered manager and office staff.

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

### After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at policies and procedures. We spoke with health and social care professionals who are involved in people's care.

# 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 good. At this inspection this key question has remained the same. This meant people were safe and protected from avoidable harm.

### Assessing risk, safety monitoring and management

- The provider had a system to assess risks to the safety of people before undertaking their care.
- Risk assessments and care records were available to staff, people and relatives on an electronic record system so staff had constant access to it.
- The details and quality of risk assessments were inconsistent. Some records did not always set out enough information for staff about how to mitigate risks to people, for example where people were at risk of pressure damage. The registered manager stated there were plans to increase senior staff who would take responsibility for improving the quality of care records.

We recommend the provider reviews each person's risk assessments and associated care records to ensure these include detailed measures to protect people from avoidable harm.

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

- Systems were in place to minimise the risk of abuse.
- People and relatives said they felt the service was safe. They told us, "I am safe in their hands", "I rely on them and they make me feel safe" and "They are lovely people I feel very safe. They know what they are doing and are kind."
- Staff had training in safeguarding and access to safeguarding procedures. Staff told us they understood their responsibility to report issues and said they were listened to. Their comment included, "The manager will follow up any concerns" and "[Registered manager] listens."

### Staffing and recruitment

- At the time of this inspection, there were enough staff to meet the needs of people using the service. Prior to this, several staff had left suddenly which had meant potentially unsafe gaps in the rota. Remaining staff had worked hard to cover any gaps and the registered manager collaborated with local commissioners to ensure people continued to receive support.
- People spoke positively about staffing arrangements, even if they did not have regular care staff. They told us, "The times vary a little but I don't mind because they are good at their job" and "I don't know who is coming, and I might not see them again, but they are all well trained."
- Overall, the provider's recruitment process minimised the risk of unsuitable staff being employed. At the time of this inspection, the provider did not record the health condition of any applicants relevant to the tasks they would perform. The registered manager addressed this immediately.

### Using medicines safely

- Medicines were managed in a safe way. People who received support with medicines said staff "put the medicine in front of me and then check that I have taken it".
- The service used an electronic recording system to record the times and doses of medicines. Staff had access to the record on their phones. The system immediately alerted office staff if medicines had not been recorded as administered.
- Staff had training in medicine management. Further training and competency checks were being arranged.

#### Preventing and controlling infection

- The provider had made sure there was sufficient equipment and training for staff to prevent staff from catching and spreading infections throughout the pandemic.
- People told us staff used safe hygiene practices. Their comments included, "[Staff] always wear full PPE, I feel safe" and "They always wear masks and gloves and aprons and are tested every week."
- The provider accessed regular COVID-19 testing for staff. Staff had access to up-to-date information about infection prevention and control.

#### Learning lessons when things go wrong

- The provider and registered manager were fully aware of recent shortfalls in the service, including staffing levels, communication amongst staff and care records.
- The registered manager said the organisation had learnt lessons from these events and were putting stringent actions in minimise the risk of these recurring. These included a new auditor role, senior staff roles and increased review and audit of the service.

# 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 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 had a person-centred culture and empowered people to make decisions about their own care. People said they felt valued by the service and commented, "They treat you as a person, as part of the family."
- People and relatives said they were involved in the care arrangements and had access to their care records. For example, one relative told us, "I can see everything on the iPad; they do write everything down."
- Staff said the organisation was committed to an open, positive culture. Their comments included, "They are very supportive, very approachable and very caring towards both the clients and the staff" and "[Provider] and [registered manager] really go over and beyond to make sure the service users are getting the care they deserve."

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; 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 carried out monthly audits of the service and acted on the findings.
- The provider and registered manager were committed to continually improving the service. They were fully aware of recent shortfalls in the service and had already begun action to address these.
- The provider and registered manager understood their responsibilities to be open and transparent if anything went wrong.

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

- People felt able to raise any comments at any time. They told us, "If ever I have had a problem, I just ring the manager" and "The office staff are all very nice and very helpful."
- The provider sought the views of people who used the service via a survey. Previous responses were not analysed or shared with others, so it was not clear if any comments were acted upon. The registered manager said they would do this for future surveys.
- Staff said communication was getting better and this was an area for further improvement. Their comments included, "I feel I am listened to" and suggested, "Listen to carers more in staff meeting when we have them."
- The service collaborated with other health and social care professional to meet the needs of people who used the service.

