

Eden Country Care Limited

# Eden Country Care Limited

## Inspection report

Units 5a/5b, Redhills Business Park  
Redhills  
Penrith  
Cumbria  
CA11 0DT

Tel: 01768865594

Website: [www.edencountrycare.co.uk](http://www.edencountrycare.co.uk)

Date of inspection visit:  
08 August 2016  
30 August 2016

Date of publication:  
29 September 2016

## 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

This announced inspection took place between 8 and 30 August 2016. We last inspected this service in January 2014. At that inspection we found that the provider was meeting all of the regulations that we assessed.

Eden Country Care Limited provides personal care and support to adults living in their own homes. The agency is based in Penrith and provides support to people living in Penrith, Appleby, Kirkby Stephen, Shap, Carlisle, Alston, Keswick and the surrounding areas. Services offered by the agency include personal care, shopping, housework and preparing meals.

There was a registered manager employed at the service. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.

People received a high quality of care. They were including in planning and agreeing to the support they received and were asked for their views about the service provided.

Staff were kind and caring and people valued the support they received. People were treated with respect and supported to maintain their independence.

People received the support they needed with managing their medicines and to maintain their health. They gave consent to the care they received. The registered manager understood her responsibilities under the Mental Capacity Act 2005 and the rights of people who needed support to make decisions were protected

There were enough staff to provide the support people needed. The staff were recruited safely and completed training to give them the skills and knowledge to provide people's care. The staff felt well supported and enjoyed their jobs.

People were protected against the risk of abuse. Hazards to their safety had been identified and action taken to manage risks.

There were appropriate arrangements to ensure the effective management of the service. People knew how to contact a senior person in the agency if they needed.

The registered manager was knowledgeable about her responsibilities and committed to providing a high quality service. She set high standards for staff to work to and monitored the service to check these were met.

The directors of the organisation worked in the agency and maintained oversight of the quality of the service

provided.

## 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.

People were protected from abuse and avoidable harm.

There were enough staff to provide the support people required.

Risks to people's safety had been identified and managed.

### Is the service effective?

Good ●

The service was effective.

The care staff completed training to give them the skills and knowledge to provide people's care.

People gave consent to the care they received. The registered manager understood her responsibilities under the Mental Capacity Act 2005 and the rights of people who needed support to make decisions were protected.

People received the support they needed to maintain their health.

### Is the service caring?

Good ●

The service was caring.

People received a high standard of care from staff who were kind and caring.

People were supported to make decisions about their care and to express their wishes.

People were supported to live in their own homes and to maintain their independence.

### Is the service responsive?

Good ●

The service was responsive.

Care was planned and delivered to meet people's needs and to

take account of their wishes.

People knew how they could complain about the service and were confident their concerns would be resolved.

**Is the service well-led?**

**Good** ●

The service was well-led.

The registered manager set high standards for staff to work to and monitored the service to check these were met.

Appropriate arrangements were in place to ensure the effective management of the service.

The organisation directors worked at the agency and maintained oversight of the quality of the service.

# Eden Country Care Limited

## **Detailed findings**

### Background to this 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 was planned to check 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.

The inspection took place between 8 and 30 August 2016 and was announced.

We gave the registered provider notice of our visit on 8 August because the location provides a domiciliary care service and we needed to be sure that the registered manager would be available to speak with us.

The inspection was carried out by two adult social care inspectors.

We visited the agency offices on 8 and 30 August 2016 and looked at care records for six people who used the service and at the recruitment and training records for three staff. We also looked at records relating to complaints and how the provider checked the quality of the service. We contacted ten people who used the service by telephone and visited five people in their own homes. We also spoke with the registered manager and three directors of the service, members of the agency management team and 11 members of the care team.

Before the inspection, the provider completed a Provider Information Return (PIR). This is a form that asks the provider to give some key information about the service, what the service does well and improvements they plan to make. We reviewed the information we held about the service, including the information in the PIR, before we visited the service. We also contacted the local authority commissioning and social work teams for their views of the service.

# Is the service safe?

## Our findings

Everyone we spoke with told us they felt safe with the care they received from the service. People told us they felt safe with the staff who visited their homes. One person told us, "I feel totally safe with my girls [care staff". Another person said, "I have never had any concerns at all about my safety".

People said that there were enough staff to provide the support they required. They told us that they usually received support from small team of staff who they knew. People told us that the care staff arrived on time and no one we spoke with said their care staff had failed to attend their home as arranged. People told us they consistently received the support they needed to ensure their safety.

The staff we spoke with told us they had completed training in how to identify and report any concerns that a person was at risk of abuse. Where staff had concerns about an individual being at risk of harm we saw they had taken appropriate action to protect the individual and other people who may have been at risk. One member of staff had identified that a person was as possible risk of fraud. They had taken action to protect the individual and had shared their concerns with the registered manager of the agency. The registered manager reported the concerns to the appropriate authority and shared information about how people could protect themselves from the risk of fraud in the agency's newsletter for people who used the service.

Providers of health and social care services are required to notify the CQC of any allegations of abuse they are informed about. The registered manager of the service had informed us of all allegations as required. This meant we could check that appropriate actions had been taken to protect people from the risk of harm.

Risks to people's safety had been identified and actions taken to reduce or manage hazards. Risk assessments were in people's care records to guide staff on the actions to take to protect individuals from harm.

The staff we spoke with knew how to ensure people's safety. They told us that people's care records and their risk assessments contained the information staff required to provide care in a safe way.

The registered provider had systems for staff to follow in the event of a foreseeable emergency. These included an emergency plan for coping with floods and actions for staff to take if they could not gain entry to a person's home to provide planned care.

The registered provider operated an on call system to support people who used the service and care staff when the agency offices were closed. All of the staff we spoke with told us they felt well supported and said they knew how they could contact a senior person in the organisation if they were concerned about a person they visited. People who used the service said they were always able to contact someone at the service if they needed to.

Safe systems were used when new staff were recruited. All new staff had to provide evidence of their good character, conduct in previous employment and undergo a check against the records held by the Disclosure and Barring Service. All of the staff we spoke with confirmed they were not allowed to visit people in their own homes until all the required checks had been completed. People who used the service could be confident new staff had been checked appropriately.

The registered manager of the agency had identified that it was essential for the agency to retain staff in order to ensure the quality of the service provided. They had introduced systems to provide new staff with additional support during their first months of employment. All of the staff we spoke with told us they felt very well supported by the agency. One staff member told us, "I have worked in care for years but never been supported like this". This helped to ensure there were enough staff to provide people's care. The support provided also meant staff were given opportunities to raise any concerns with a senior person in the agency who they trusted and knew well.



# Is the service effective?

## Our findings

People we spoke with told us that the staff who supported them were knowledgeable about how to provide their care. They told us they thought the staff were well trained and one person told us, "The staff know what they are doing, so I assume they are trained, I've never had any concerns that the staff aren't well trained".

The care staff we spoke with told us they had completed training to give them the skills and knowledge to provide people's support. New staff we spoke with told us they completed thorough induction training before working in people's homes. They said this included working with more experienced staff before working on their own in people's homes.

Staff who worked with people who had complex needs told us they had completed additional training specific to the individual and support they required. They told us that this included training in how to use specialist equipment that people used.

There were systems in place to manage how staff were deployed. These ensured that, where people had more complex needs, staff were only assigned to provide their care if they had completed appropriate training.

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 so that they can receive care and treatment when this is in their best interests and legally authorised under the MCA.

People told us that the staff who visited their homes only provided their care with their agreement. They said they could refuse any part of their planned care if they wished and said the staff respected the decisions they made. One person told us, "The staff always ask what I want". Another person said, "If I'm down to have a shower and I don't feel up to it that's fine, the staff help me to have a wash and I can have a shower another day".

Care staff we spoke with showed that they understood the need to respect the decisions people made. One told us, "It's drummed into us all, we have to ask what people want and respect their decisions".

The registered manager was knowledgeable about the MCA and how to ensure that the rights of people who were not able to make or to communicate their own decisions were protected.

Most of the people we spoke with told us they did not require support from the care staff who visited them to arrange or attend health care appointments. We saw that, where appropriate, people's care records gave

advice for staff about the appropriate health care services to contact if they had concerns about an individual's health. We also saw that care staff had taken prompt action to support people at risk due to health conditions. People who used the service received support as they required to maintain their health.

# Is the service caring?

## Our findings

Everyone we spoke with told us that the staff who visited their homes were caring, friendly and respectful. They told us the staff knew the care they required and provided this. One person told us the care staff "were like sunshine arriving" and another person said, "I look forward to the staff coming, they do what I need them to but we also have a laugh and a joke".

People told us that they received a high quality of care from the service. They said the care they received supported them to remain living in their homes and said this was important to them. One person told us, "This is an excellent service, the care staff are marvellous" and another person said, "It's important to me to be at home. I couldn't manage without the staff, they have been a Godsend".

All of the staff we spoke with said they were confident people received a high standard of care from the agency. They told us they had the time they needed to provide people's care and would recommend the service to their own friends and relatives. One staff member said, "I'm proud to work for this agency, I know we provide people with good care".

People told us, and we saw at our visits, that the staff knew the people they supported well. People told us the staff knew the things that were important to them in their lives and how they wanted their care to be provided. One person said, "The staff know my little quirks, they know what I like and what I don't like, they always respect my wishes, they are a great help to me".

People told us the staff made them at ease and said this was important. One person told us they had been anxious about having care staff visit their home and said, "At the start I really wasn't looking forward to staff coming in, but they [care staff] put me at ease straight away and now I look forward to each visit".

Everyone we spoke with said they were included in decisions about their support and asked for their views about the care they received. At our visits we saw that the staff were attentive and asked people if there were any other tasks that they wished to be carried out.

People told us the support they received helped them to remain as independent as possible. They said the staff allowed them to carry out tasks themselves and only provided assistance with tasks they could not manage on their own. One person told us, "The staff help me to do what I can for myself, they don't intrude, they respect my privacy and independence".

No one we spoke with needed support from an independent person to express their wishes about their support. Some people told us they were supported by relatives and one person said, "My daughter comes most days to help me, she'd speak to the office for me if I asked her". The registered manager of the agency had links with local advocacy services who could be contacted if people needed support to express their wishes. Advocates are people who are independent of the service who can support people to make important decisions or to express their views.

## Is the service responsive?

### Our findings

People we spoke with told us that the service they received was responsive to their needs and their wishes. They told us that if they requested changes to the times of their planned visits the agency tried to agree to their requests. One person told us, "They [care staff] are happy to come early if I need help to get ready for an appointment". Another person said, "When I have asked for any changes to my visit times, these have always been agreed".

People told us they were asked what support they wanted and said this was recorded in their care plans. They told us their care plans were reviewed regularly to make sure they held up to date information for the staff who supported them. Everyone we spoke with said the staff who visited them knew the support they wanted and how they wished this to be provided. Care staff we spoke with said they knew the support individuals required because this was recorded in their care plans.

The staff we spoke with knew how to report any changes in the support a person required. One member of staff said, "If I notice a client needs more care, I ring the coordinator and they arrange for the care plan to be changed". This helped to ensure care staff had accurate information about the support individuals required.

The registered manager was aware that some people could be at risk of becoming isolated in their homes. They had arranged local social activities for people to attend. One person told us they were aware of a planned activity and were deciding if they wished to attend.

The registered provider had a procedure for receiving and responding to any complaints about the service provided. People we spoke with said they knew how they could report any concerns about the care they received. One person told us, "I've never had any concerns but I know I can call the office if I wanted to speak to someone".

Eden Country Care Limited was based in the area where the service provided care. Most of the people we spoke with told us that they knew the owners or the service and the registered manager. One person said, "I know I could just pick up the phone and speak to [the registered manager] if I had a problem".

The registered provider also had a public social media profile where people who used the service could raise any concerns. This meant people had a variety of ways to raise concerns about the care they received.

We looked at the actions taken in response to concerns that the service had received. We saw that concerns had been investigated so the registered manager could identify where the service could be further improved.

## Is the service well-led?

### Our findings

Everyone we spoke with told us the service was well managed and said they would recommend it to other people. They told us they knew the registered manager and the directors of the service and how they could contact a senior person in the agency if they needed. One person told us, "This isn't some 'faceless' organisation, I know who to speak to when I call the office, I know I can speak to [named directors of the organisation] if I have any problems". Another person told us, "It's not that you ring and have to ask someone 'Who are you', I know who's who in the office".

People told us they were asked for their views about the service they received. Some people told us they had completed a quality survey to share their experience with the registered provider. Other people said they were asked for their views when their care plan was reviewed. People told us they felt the registered manager listened to their comments and wanted to provide the best service possible.

There was a registered manager employed at the service. The registered manager was supported by a team of senior managers, lead care coordinators, local care coordinators and finance and administrative teams. There were suitable arrangements to ensure the effective management of the service.

People we spoke with told us they knew the registered manager and local care coordinators and would be confident to speak with them if they had any concerns about the service they received.

All of the staff we spoke with told us the owners and registered manager of the service set high standards for them to work to. They told us the registered manager was committed to providing people with a high quality service.

The registered manager carried out checks to assess the quality and safety of the service provided. Where areas were identified where the service could be further improved, the management team had taken action to ensure the continuous improvement of the service. The registered manager had identified the need to ensure staff were supported in the early stages of their employment and had introduced systems to improve the support provided. They had also identified how people could be at risk of isolation and arranged local social events that people could attend.

The registered provider had newsletter for people who used the service and the staff employed. These were used to provide information about the service and also to share advice on how to keep people safe. We saw that the newsletter sent to people who used the service also gave people opportunities to share their views about the support they received.

Eden Country Care Limited was a family run business and the directors of the organisation worked in the agency. This helped the directors to maintain oversight of the quality of the service provided.

Providers of health and social care services are required by law to inform the Care Quality Commission, (the CQC) of significant events which affect the service or people who use it. The registered manager of the

service had sent us required notifications promptly. This meant we could check that appropriate action had been taken.