

K.C. Carers Limited

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Inspection report

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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

K.C. Carers Limited is a domiciliary care agency that provides personal care to people in their own homes. The Care Quality Commission (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 38 people were receiving personal care from the service.

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

People were cared for safely. Safe recruitment practices were in place and people were assured they had regular staff they trusted who supported them. We received several positive comments such as 'I feel very lucky and blessed to have such a good team of carers, nothing is too much of a problem for them.' 'They are a reliable and caring company who have taken a huge weight off my shoulders with the care they provide.'

Staff knew how to keep people safe from abuse or harm. Risks to people's health had been assessed and plans were in place to reduce any risks identified. People received their medicines safely and there were effective practices to protect people from risk of infection.

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.

The registered manager was committed to providing a service that promoted person centred care. People's and staff views were sought to help drive service improvement. The registered manager and staff team worked in partnership with health and social care professionals to ensure people received care which followed a consistent approach.

Systems and processes were in place to continually monitor quality, safety and oversight of the service. The registered manager understood their legal responsibilities and continually worked towards driving improvement at the service.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk

Rating at last inspection

The last rating for this service was good (published 2 July 2021).

Why we inspected

We received concerns in relation to the management of safeguarding concerns. 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.

We found no evidence during this inspection that people were at risk of harm from this concern.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for K.C.Carers Limited on our website at 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 •
Is the service well-led? The service was well-led.	Good •



K.C. Carers Limited

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 Health and Social Care Act 2008.

Inspection team

The inspection was undertaken by 1 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 houses and flats.

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 24 hours' notice of the inspection. This was because it is a small service and we needed to be sure that the provider or registered manager would be in the office to support the inspection.

Inspection activity started on 3 May 2023 and ended on 9 May 2023. We visited the location's office on 3 May.

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. 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 7 people who used the service and 6 relatives about their experience of the care provided. We spoke with 8 members of staff including, the registered manager, care manager, care co-ordinator, administrator and care workers.

We reviewed a range of records. This included 4 people's care records and medication records. 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 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.

Systems and processes to safeguard people from the risk of abuse

- People were cared for safely and were protected from the risk of harm. Staff knew what signs to look for to keep people safe.
- Staff received safeguarding training and knew how to recognise and report any concerns of abuse. One staff member said, "I would report to the on-call manager and police if needed. I expect the manager would report to the local authority." There were up to date procedures and information available to support staff.
- The registered manager understood their responsibilities to keep people safe and had notified the local authority when any safeguarding concerns had arisen. One relative told us, "Due to [loved-one's] decline in mobility and mental health since being in the hospital [registered manager] raised safeguarding concerns to social services and rapidly increased the care package, without the funding being approved to ensure they were kept safe."

Assessing risk, safety monitoring and management

- Assessment of risk to people's care had been undertaken and plans were in place to guide staff how to mitigate the risk identified. Staff knew how to keep people safe and mitigate any risks identified.
- People told us staff understood how to provide them with safe care. One relative said, "The carers are well skilled and have been trained well which has enabled [loved-one] to be mobilised safely."
- Environmental risks had been assessed to keep staff safe at work and reduce any unnecessary risks to people.

Staffing and recruitment

- People were protected against the risk of being supported by unsuitable staff because there were appropriate recruitment practices in place. Staff were checked for any criminal convictions and satisfactory employment references were obtained before they started to work for the service.
- There were enough suitably qualified, experienced, and skilled staff to provide people with safe care and support. One person said, "They [care staff] are on time for my call and they never appear to rush or say they have to hurry to another call." A relative said, "[Loved-one's] calls are on time and there have never been any missed calls."
- The staff deployment and scheduling arrangements ensured people's needs were met safely. People had regular care staff who knew them well.

Using medicines safely

• People's medicines were managed safely. One relative said, "[Loved-one's] medication is managed by the carers, and it is done properly and on time."

- Staff received training in administration of medicines and checks were in place to ensure medicines were being administered as prescribed by competent staff.
- Records showed medicines audits took place so that any errors or missed medicines or other concerns around the management of medicines could be quickly addressed.

Preventing and controlling infection

- The service used effective infection, prevention and control measures to keep people safe, and staff supported people to follow them. One relative said, ""During the pandemic, they[staff] were superb, their hygiene control and the way they had gloves ,masks and aprons, using hand gel and washing hands they were brilliant."
- Staff used personal protective equipment (PPE) effectively and safely.
- The provider had an up-to-date infection, prevention and control policy in place and ensured staff followed the guidance.

Learning lessons when things go wrong

• Lessons were learnt when things went wrong, and the registered manager used the opportunity to reflect and look at ways to improve the service. For example, a new Hospital grab sheet had been put in place which ensured if people were taken to hospital staff, families and professionals had access to up-to-date information about the person's care needs and medication.



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 our last inspection we rated this key question good. The rating for this key question has remained good. This meant the service was consistently managed and 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

- People were at the heart of everything the service did. The management team and staff were focused on providing individualised care and achieving good outcomes for people and their families.
- All people using the service and relatives were positive about the care and support they received. One person said, "They [care staff] are highly skilled and look after me well but encourage me in doing things for myself as independence is important to me." A relative told us, "[Loved-one's] overall health and mobility has significantly improved since their hospital discharge due to the input and patience from their carers. They have carers they know and trust."
- The registered manager and management team were visible and available within the service, at times working alongside staff to provide the care and support needed. This enabled the registered manager to fully understand the needs of the people and challenges the staff may face.

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 understood their responsibility under the duty of candour. The duty of candour requires providers to be open and honest with people when things go wrong with their care, giving people support and truthful information.
- The registered manager understood information sharing requirements, and knew when concerns had been identified, appropriate notifications should be sent to the CQC and the local authority as required by law.
- Staff told us there was information available about how to whistle-blow. This ensured they knew how to raise concerns with the local authority and the CQC if they felt they were not being listened to or their concerns were not acted upon.

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

- Systems and processes were in place to monitor the quality and performance of the service. Audits of records were undertaken, and action taken if shortfalls were found.
- Staff were clear about their roles and responsibilities towards the people they supported and felt supported in their role. They had regular supervisions, which ensured they provided the care and support at the standard required.
- Staff spoke positively about the management team. One said, "KC Carers are very family orientated, they

make you feel like family and friends. [Registered manager] is approachable and supportive."

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

- People and families were contacted regularly for their feedback. One relative said, "The company is managed well, and the managers check in regularly to review how the care is going"
- Staff were encouraged to give their feedback. They felt listened to, one said," We are all listened to, and they are interested in any ideas you have. I made one suggestion which is now included in the care plan."

Continuous learning and improving care; Working in partnership with others

- The registered manager supported staff through reflective practice. This gave staff the opportunity to reflect on the care they had delivered and consider how this could be improved upon.
- People's care records demonstrated how staff supported them to access advice and guidance from health care professionals and services. One relative said, "The carers worked with the district nurses and with the care and skin monitoring, [loved-one] bed sores have cleared ,their personal care and management has been excellent."
- The registered manager worked with the local authority. Following a recent monitoring visit from the local authority an action plan was put in place to address the shortfalls identified. The registered manager had taken action to address the shortfalls and was open and responsive to ways of improving the service. This was also demonstrated throughout the inspection.