

Kensington Community Care (Gloucester) Ltd

# Kensington Community Care Birmingham

## 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

This inspection took place on 18 December 2017 and was announced. We gave the registered manager notice of our intention to undertake an inspection. This was because Kensington Community Care Birmingham provides personal care for people who live in their own homes and we needed to be sure that someone would be available at the office.

This service is a domiciliary care agency. It provides personal care to people living in their own houses and flats in the community. It provides a service to older adults, people living with dementia, mental health impairments, physical disabilities, sensory impairment, and younger adults.

Not everyone using Kensington Community Care Birmingham Service receives regulated activity; CQC only inspects the service being received by people provided with 'personal care help with tasks related to personal hygiene and eating. At this inspection we found that 57 people were receiving this type of support. Where they do we also take into account any wider social care provided.

There was a registered manager in post when we inspected this 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.

The service was last inspected in October 2016, and was rated as requires improvement overall. We found improvement was needed with the training staff received and how the provider recorded people's capacity to make decisions. We also found people's care plans were not personalised to ensure staff were aware of people's individual risks. The systems in place to ensure shortfalls were identified were not consistently effective. We looked at how the service had improved since our last inspection.

People were supported by staff that understood how to keep people safe. We saw examples where safe guarding concerns were raised and acted upon. People had clear risk assessments and were supported by regular staff. Staff understood how to protect people from abuse and protect them from infection through their practice. The registered manager investigated accidents and incidents and took action to ensure people were safe.

People and their relatives told us there was a clear assessment process and people had the support they needed. Staff received appropriate training that maintained their skills. When people needed support with food and drink, staff promoted a healthy lifestyle. The management team worked with other organisations when they needed to, and ensured health professionals were involved as required. People were able to make their own decisions and staff supported them to be as independent as possible.

People were supported by caring staff who listened to people and met their needs. People had support from regular staff that knew them well. Staff encouraged people to be as independent as possible and treated

them with dignity and respect.

People said they had their needs met, and staff said they had the information they needed to ensure people had the support they wanted. People were supported in a flexible way and the service was adapted to changes in their needs. Complaints were investigated and actioned and lessons learnt shared with staff.

Systems in place to monitor the quality of the care identified short falls and the management team put in place an improvement plan to ensure quality care was delivered. The registered manager knew people's needs well and regularly talked to people about the quality of their care. Staff said they were well supported and were supported to share best practice ideas.

## 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 received support from familiar staff who knew them well. Staff had a good understanding of how to keep people safe and supported people to manage their risks. People were supported by sufficient numbers of staff to keep them safe and meet their needs. People had their medicines when they needed them, with support from trained staff. Staff applied safe practice to reduce the risk of infection. The management team investigated accidents and incidents.

### Is the service effective?

Good ●

The service was effective.

People's needs were assessed and staff knew their preferences. People were supported by staff that had the knowledge and skills to provide their care. People were supported with maintaining a healthy diet and with on-going healthcare support. Staff worked with other organisations to provide effective support. People received care they had consented to and staff understood the importance of this.

### Is the service caring?

Good ●

The service was caring.

Peoples were involved in their care and made decisions about how they were supported. People were supported by staff that were kind and caring towards them and their family members. People's privacy and dignity were maintained.

### Is the service responsive?

Good ●

The service was responsive.

People benefitted from records that clearly reflected their needs and wishes so staff could provide consistent support. Care provided was adapted when people needed more flexibility. The registered manager investigated complaints and took appropriate action. People were supported in a dignified way if

they were at the end of their life.

**Is the service well-led?**

**Good** ●

The service was well-led.

People were supported by a service that consistently identified their shortfalls and made effective improvements. Staff were well-supported and confident the management team knew people well. People benefitted from a management team that worked well with other organisations.

# Kensington Community Care Birmingham

## **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.

This inspection took place on 18 December 2017 and was announced. We gave the service 48 hours' notice of the inspection visit because it is small and the registered manager is often out of the office supporting staff or providing care. We needed to be sure that they would be in.

Inspection activity started on 14 December 2017 and ended on 21 December 2017. It included speaking with people, relatives on the telephone. We visited the office location on 18 December 2017 to see the registered manager and staff; and to review care records and policies and procedures. The inspection team consisted of one inspector. As part of the inspection we reviewed information we held about the service including statutory notifications that had been submitted. Statutory notifications include information about important events which the provider is required to send us by law. We contacted the local authority to understand if they had any relevant information to share with us.

We spoke with three people who used the service and eight relatives who supported their family member with the management of their care. We also spoke with eight care staff, the registered manager and the registered provider. We looked at aspects of 13 people's care records and medication records. We also looked at three staff files, policies and procedures, the registered manager's complaints procedure, compliments, and audits completed by the management team.

# Is the service safe?

## Our findings

This service was inspected in October 2016 and we rated this section as Good.

All the people we spoke with said they felt safe whilst being supported by staff. One person told us "They are very reliable, I always know who's coming, and even in the snow they rang me." Another person said "I feel safe because [staff] really know me well." Relatives we spoke with were confident their family member was safe with staff. One relative said, "It's been such a relief since they [staff] have been helping, they are so good and always reliable. I know if there is a problem they will let me know."

Staff told us the registered manager had provided them with information about safeguarding and how to report concerns when needed. Staff had a good understanding of different types of abuse they may see and what approach they would take to raise their concerns. Staff explained to us how they would report any concerns to the registered manager or other external agencies if they needed to. All staff we spoke with felt confident the registered manager would take action if they did raise any concerns. The registered manager had a good understanding of her responsibility to protect people from potential harm. We saw how the registered manager worked with external agencies to ensure people were safe.

All people we spoke with said staff had a good understanding of their care needs and worked with them to ensure their safety was maintained. People told us staff had discussed with them from the beginning if there were any individual risks they needed to manage. One person told us they needed support to shower safely. They said staff always supported them and they were confident completing their shower because of the staff support. Another person told us staff always left the things they needed to hand, which was important to them to maintain their independence and keep them safe. Staff said people had plans in place to ensure they remained safe. They told us these were updated when they needed to be and information shared with staff.

All the people and their relatives we spoke with told us staff had time to support them safely, without rushing people with their support. Staff confirmed they had enough time to support people without rushing them. People and relatives told us they had regular staff who knew their needs. One relative told us how the staffing reflected the person's individual care needs, and said where more time or staff were needed to meet their family members particular needs the management team ensured this had happened.

The registered manager told us they were actively recruiting for more staff to ensure they continued to have sufficient staff to keep people safe. One staff member said, "I have enough time to spend with people, you get time to talk to people". The staff team communicated with each other on a daily basis so the registered manager had good assurances that they had sufficient staff to meet people's needs.

Staff told us and we saw, the provider followed appropriate practices to ensure people were not put at risk through their recruitment procedures. Staff said they shadowed experienced staff to ensure they had the skills they needed to support people.

Some of the people we spoke with had support with their medicines as part of their care needs. People told us they had their medicines when they needed them, and were confident staff were knew about their medicines. Staff told us they were trained and their competency checked before they administered people's medicines. Medication charts we saw had been completed and signed as appropriate.

Relatives were confident that staff gave them their medicines as prescribed. One relative told us staff were very reliable with their family members medicines. They said, during recent extreme weather the management team had ensured staff attended the visits which included medicines to ensure their family member received the essential support.

People and relatives told us staff used gloves, aprons and washed their hands which demonstrated staff had good infection control practices. People did not raise any concerns to us about the way staff ensured they protected them from risk of infection. Staff told us they had received training in food hygiene and infection control, they confirmed they had access to equipment that protected them and the people they supported. The registered manager told us regular spot checks were completed to ensure staff were following best practice in regards to preventing infections.

Staff told us they always contacted the office about any accidents and incidents. They also said if there were any lessons learnt these were shared with staff when appropriate. For example if someone had fallen, and the doctor had visited and diagnosed an infection that staff needed to be aware of to support the person safely. We saw there were records of actions taken by the registered manager to investigate accidents and incidents.



# Is the service effective?

## Our findings

This service was inspected in October 2016 and we rated this section as requires improvement. The service needed to improve the training staff received and how the provider recorded people's capacity to make decisions. At this inspection we found improvement had been made.

People told us the management team assessed their needs before they started receiving support. We saw assessments were thorough and recorded people's needs and personal histories, and their individual likes and dislikes. Where preferences were identified we saw these were captured in people's care plans, and staff confirmed they understood people's care plans.

People told us staff were knowledgeable about how to support their needs. Relatives were confident staff had been trained and understood how to support their family member. Staff told us they had received intensive training when they had started with the service. One member of staff said, "I can always talk through anything I'm not confident about, [registered manager] is very good and will happily spend the time with me." They went on to say they were checked by senior care staff after they had completed their training and shadowing of experienced staff. They said this had been good feedback to increase their confidence. They also received feedback through the office staff from people they supported which they found very useful. Existing staff said they were in the process of updating their skills. The registered manager had a plan in place to ensure all staff updated their skills and knowledge regularly.

People told us staff supported them to eat and drink when identified as part of their care needs. One person said staff offered them choice and always listened to them. Relatives told us they were reassured staff supported their family member to eat healthily, and where appropriate report to them if there were any concerns. One relative explained that staff were adaptable to their family member's needs, if they didn't want a meal they would ensure there was food prepared for the person to eat later. People said staff always left them drinks to support them to remain hydrated. One member of staff told us they joined the person with their meal because this encouraged the person to eat.

Relatives we spoke with explained staff worked with other organisations to support their family member. One relative told us staff worked with the district nurse team to improve their family member's sore skin. Another relative said staff had worked with social care professionals to ensure their family member was supported effectively.

People we spoke with said staff supported them to maintain their health, for example identify any concerns about sore skin and take appropriate action. Relatives were confident staff would raise any concerns about their family member's health and well-being, as appropriate, and take the required action. One relative told us staff had contacted the doctor for their family member when they needed to. Staff told us they checked the person's skin to ensure it was healthy. One staff member said, and we saw from the person's care records, when a person's skin became sore they had contacted the district nurses for additional support, and as a result the person's skin improved.

Staff told us they had completed training in the Mental Capacity Act 2005 (MCA). The 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.

We spoke with people and their relatives and they explained staff always checked people accepted their support. One relative explained that staff were patient with their family member who frequently refused their support. They went on to say how staff respected their family member's decisions and did the best they could to encourage their family member. They said receiving support from the same staff had helped their family member respond more positively to staff. Staff we spoke with had an understanding about the MCA and said most people they supported had capacity to consent to their care. The care co-ordinators knew who needed support with decisions and who should be involved with best interest decisions. We spoke with the registered manager they were reviewing the paper work they used to capture this information. This was in their improvement plan for the service. However staff told us they had clear information and people's relatives said staff demonstrated practice compliant with the MCA.

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. We checked whether the service was working within the principles of the MCA. Any applications to deprive someone of their liberty for this service must be made through the Court of Protection. There was no one who needed support from the Court of Protection who used the service.

## Is the service caring?

### Our findings

This service was inspected in October 2016 and we rated this section as good.

People we spoke with said staff were kind and caring and the service they received supported their well-being. One person told us, "[Staff] are very consistent, it feels like they are chosen because they are all very caring positive staff." Another person said, "I have regular staff, they are wonderful, they know me so well." Relatives told us staff were patient and compassionate. One relative said, "I always see [family member] sharing a laugh and a joke, they get on so well together, I know [family member] looks forward to their visits immensely."

People we spoke with told us they felt they were involved and included in decisions about their care. For example, one person said they had found the times of their visits had not worked for them at the beginning. They told us they had discussed with the management team and they had tried different times until the visits worked for them. Relatives said they were involved where appropriate with discussions about their family members care needs. One relative explained how they had attended a meeting with a social worker to check their family member was being supported as they needed.

Staff spoke about people with compassion and they knew people well. They told us they visited people on a regular basis so they got to know people and their families well. One staff member spoke to us about a person they regularly supported and said, "I have a good relationship with all the people I help and their families. We work together as a team which works so well." Staff told us they had time to spend with people to have a chat with them. One staff member said, "I have time to talk with people, their faces light up when we sit and have a laugh and a joke."

People said staff maintained their independence as much as possible. One person told us, "If I didn't have such good help I couldn't stay here, we have a routine so we all know what we are doing." Another person said, "They [staff] put things so I can reach them and sort myself out when they leave." Relatives we spoke with said staff gave the right amount of support to their family member. Staff spoke about people as individuals and told us about how they promoted people's independence. One staff member said, "Everyone like things done in a certain way, they feel more respected and independent if we follow their lead."

People told us they were treated with dignity and respect. One person said, "They [staff] always listen to me and that's important, I feel respected." Another person said about staff, "Having familiar faces is much more dignified, I always have my shower with [staff] I know." Relatives felt their family members were treated with dignity. One relative explained staff maintained their family member's privacy at all times by closing doors. Staff told us they always maintained people's dignity, they recognised how important it was for people. Staff spoke respectfully at all times about people when they were talking to us.

## Is the service responsive?

### Our findings

This service was inspected in October 2016 and we rated this section as requires improvement. The service needed to improve how they recorded people's risks and care plans to ensure they were individualised. At this inspection we found improvement had been made.

People we spoke with said they had their needs met. They told us staff knew what support they needed and always asked them if they could help them with anything else before they left. One person said, "They adapt to suit me depending what mood I am in, they can tell straight away if this isn't a good day." Relatives told us regular staff knew their family member's needs well. One relative told us, "They [staff] are so brilliant; they will go above and beyond to make sure [family member] is happy. They really understand how to help it's such a relief for me." They went on to say how staff would stay longer when needed and would always listen to what their family member wanted.

All the people and their relatives told us the service was flexible to meet people's needs. One person said if they needed to change their visits the office staff would always arrange this for them. They explained how they had a regular contact at the office who knew them well. Relatives explained when their family member needed extra support, the management team were quick to respond and put this in place.

We looked at 13 people's care plans and saw people's plans were detailed about their needs and preferences. Staff told us they had clear guidance about new people's needs through the management team so they had a good understanding how to support people when they met them. They said they would always ask people, and check if they wanted things done in a certain way. Staff told us there was good communication and updates when people's needs changed.

People told us they were contacted by the management team regularly to ask if they were happy with their care. All the people said they were usually very satisfied with their support and when they had raised a concern the management team had taken action. One person told us about the registered manager visiting them to discuss changes in their needs. Relatives we spoke with said they had been involved, where appropriate in reviews about their family member's support. They were happy that they were listened to and their family member had their needs met.

The provider had a complaints procedure for people, relatives and staff to follow should they need to raise a complaint. People and relatives told us they knew how to raise a complaint if they needed to and were confident the registered manager would listen and take action. One person said, "There were some problems at the beginning, but we soon sorted them out." People and their relatives told us the management team took action when they needed to and any concerns raised were resolved.

We looked at the provider's complaints and saw the registered manager had investigated and made improvements when needed. We saw the registered manager had checked people were in agreement with her response. Staff told us when improvements had been made these had been shared with staff to ensure they were maintained.

Staff we spoke with told us they had information which was accessible to them to enable them to support people with their agreed decisions about their end of life care. The registered manager explained how they worked with external healthcare professionals in maintaining a person's wishes to stay at their home to receive end of life care where possible. Staff spoke in a compassionate way about how they would support people at the end of their life.

## Is the service well-led?

### Our findings

This service was inspected in October 2016 and we rated this section as requires improvement. The service needed to improve how they identified shortfalls and ensured improvement was made. At this inspection we found improvement had been made.

We found there were systems in place to monitor the quality of care had identified areas of improvement. For example, we saw the registered manager had an improvement plan in place to update records relating to capacity assessments and best interest decisions. They also had a plan in place to improve how they audited people's medicine records to ensure they were completed effectively. The provider explained how they discussed any concerns on a regular basis with the registered manager, and reviewed the improvement plan. This was to ensure there was continuous improvement.

People and their relatives we spoke were happy with how the service was run. One person said, "The manager came to visit me and listened to what I wanted." Another person told us, "The whole thing is brilliantly run, the office staff really know what they are doing." Relatives said the service was well managed. One relative said, "They are all very efficient but still very caring and kind."

Staff told us they had clear roles and responsibilities and understood what was expected from them. The staff in the office we spoke with said they developed relationships with people using the service and their families to ensure they supported them effectively. One person explained they knew who to contact at the office, and were confident the staff would know them and their needs. They went on to say how this supported them to discuss any concerns or changes they needed to. Another person told us when new staff shadowed experienced staff during their visits, office staff always contacted them first to check they were happy with the arrangements. They went on to say they thought this was a good idea to give new staff an opportunity to learn.

People and their relatives told us they regularly received questionnaires from the management team which sought their ideas and feedback about the service provided. We saw the results of the last survey and the feedback was positive from people and their relatives. Where concerns were raised the registered manager had followed these up to ensure people received a quality service. For example, one person had raised a concern about not feeling involved with their care planning. We saw the registered manager had contacted them and taken appropriate steps to act on their concern.

Staff we spoke said they all worked as a team. They felt the registered manager was supportive and communicated well with them. They told us they had daily communication with the management team, and they were confident to approach them at any time. Staff said there was an open and honest culture; they felt involved with how the service was delivered. One member of staff said they were confident to admit if they had made a mistake and the management team would help them put it right. Another member of staff told us the registered manager was really supportive and had supported them with additional training when they needed it.

The provider told us about plans to move to a better office where there was space for onsite training. The registered manager explained this would support the staff team to update their skills effectively and provide an environment for continuous improvement. The provider also showed us the information technology system they had in place which enabled staff to always have the information they needed before they visited people. All the staff told us they had access to a secure system which enabled them to look at people's risk, and care needs at a glance. This also provided them with up to date information.

The registered manager worked in partnership with the local authority to ensure people were supported effectively. People and their relatives told us the management team had involved the appropriate services when they needed to, for example the social work team when additional support was needed.