

Companion Homecare Ltd

# Companion Homecare

## Inspection report

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13 March 2023

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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

Companion Homecare provides personal care to people in their own homes. The service is based in Preston and also provides support to people living in the Morecambe area. 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 our inspection, 85 people were receiving personal care.

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

We have made a recommendation about recruitment processes, although people were supported by enough staff that were trained appropriately for the role. Improvements were required in the recruitment processes. People were supported to take their medicines safely and were protected from the risk of abuse. Staff were aware of infection control guidance and people were protected from the risk of incidents being repeated.

We expect health and social care providers to guarantee people with a learning disability and autistic people respect, equality, dignity, choices and independence and good access to local communities that most people take for granted. 'Right support, right care, right culture' is the guidance CQC follows to make assessments and judgements about services supporting people with a learning disability and autistic people and providers must have regard to it. We considered this guidance as there were people using the service who were autistic.

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.

People benefitted from a positive culture within the service and staff enjoyed their jobs. The registered manager assessed risks and took steps to minimise them. The registered manager communicated well with people, their relatives and staff and encouraged further learning and development of staff to improve the service.

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

The last rating for this service was requires improvement (published 3 November 2022). The provider completed an action plan after the last inspection to show what they would do and by when to improve.

At this inspection we found improvements had been made and the provider was no longer in breach of regulations.

At our last inspection we made a recommendation about submitting statutory notifications and recruitment. The provider had acted regarding notifications, however further actions were required around recruitment.

#### Why we inspected

The inspection was prompted in part due to concerns received about recruitment. A decision was made for us to inspect and examine those risks. Although we found no evidence of harm, the concerns were partly upheld and the provider agreed to take actions to mitigate, which we will review at the next inspection.

Please see the safe and well-led sections of this full report.

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 changed from requires improvement to 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 Companion Homecare 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 well-led.

Details are in our well-led findings below.

# Companion Homecare

## 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.

#### 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 48 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 13 March 2023 and ended on 14 March 2023.

#### What we did before 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 8 people who used the service and 7 members of staff including the registered manager and care staff.

We looked at a range of records including 3 care plans, risk assessments and medicine records. We looked at rotas, policies and procedures and audits. We looked at 6 sets of staff recruitment records who had been employed since the last inspection.

# 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 requires improvement. At this inspection the rating has changed to good. This meant people were safe and protected from avoidable harm.

### Staffing and recruitment

At our last inspection we recommended the provider implemented processes and systems to check the quality of the information used for recruitment.

The registered manager had implemented systems to improve the recruitment process however these were yet to be embedded, meaning the recommendation was partially met.

- There was a recruitment policy however the registered manager did not always follow this. For example, we found 1 occasion where written records of an interview were not kept, and sometimes only 1 reference instead of 2 were obtained. However, the manager did complete risk assessments if there was difficulty in obtaining references and new staff were observed and monitored.
- Although there were enough staff, some people told us that occasionally staff did not stay for the correct length of time. The registered manager had commenced electric monitoring of this and at the time of the inspection was using disciplinary processes to address.
- We saw completed Disclosure and Barring Service (DBS) checks on staff. DBS checks provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions. However, we found that on some occasions the registered manager relied on DBS checks from previous employment. CQC guidance states there should be a new DBS check within 3 months.

We recommend the provider fully embeds and follows their own recruitment processes.

### Using medicines safely

At our last inspection the provider had failed to demonstrate that people's medicines were being safely and effectively managed. This was a breach of regulation 12(1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Improvements had been made and the provider was no longer in breach of regulation.

- There was now guidance in place for staff regarding 'as and when required' medicines, which was an improvement following the last inspection. However, more detailed information was still required. The registered manager addressed this immediately by completing new forms with more detailed information in people's care plans.
- There were detailed medicines policies, and these were in date.

- The registered manager provided training to staff in medicines management and checked their competencies.
- The registered manager completed visits at people's homes to do stock checks of medicines and check people's medicines records had been signed and followed correctly.
- Staff recorded times of when they administered people's medicines.
- The registered manager completed medicines audits and identified and addressed areas for improvement.
- People told us that staff supported them to take their medicines and that this was checked regularly.

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

- People were protected from the risk of abuse.
- There was an up-to-date safeguarding policy which staff could access.
- The registered manager provided safeguarding training to staff and staff could describe the process they would follow if they had concerns.

#### Assessing risk, safety monitoring and management

- The registered manager identified risks to people and staff and took steps to mitigate.
- There were detailed records in people's care plans, and staff could access up to date information about people's needs and risks easily.

#### Preventing and controlling infection

- We were assured that the provider was using PPE effectively and safely.
- We were assured that the provider could minimise the risk of infection outbreaks.
- We were assured that the provider's infection prevention and control policy was up to date.
- People told us that staff wore appropriate PPE such as masks and gloves where required.

#### Learning lessons when things go wrong

- There was an incident recording policy however more detail was required, which the registered manager confirmed would be addressed.
- Staff recorded incidents and the registered manager monitored these to identify and lessons learned.



# 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 requires improvement. At this inspection the rating has changed to good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; continuous learning and improving care; working in partnership with others

At our last inspection the provider had failed to make sure there were effective systems in place to monitor risk and performance of the service. This was a breach of regulation 17 (1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 17.

- At the previous inspection there was no robust auditing system, and some risk assessments were not always fully completed. At this inspection we found that the registered manager undertook audits of the service, and regularly reviewed risk assessments.
- The registered manager employed a care supervisor who completed spot checks of staff and observed their competence. Any issues and concerns were dealt with promptly.
- The registered manager monitored lateness of calls and whether staff stayed for the correct length of time. Action was being taken at the time of the inspection to address concerns with specific staff.

At the last inspection we made a recommendation about submitting statutory notifications. The provider had made improvements meaning the recommendation had been met.

- The registered manager submitted notifications to relevant organisations where required.
- The registered manager was committed to continuous learning to improve care. Staff were encouraged to complete their level 2 and level 3 NVQ training and arranged appropriate extra training as necessary.
- The registered manager and staff worked in partnership with community health care professionals from multidisciplinary teams to achieve good outcomes for people.

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

- People were cared for by staff that enjoyed their jobs and staff we spoke to said there was good morale within the company.
- Staff said they received good support from the registered manager. One member of staff said, "The manager goes above and beyond, and will sort things out quickly."

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 responsibilities under the duty of candour.
- Relatives told us the registered manager contacted them with any concerns or issues.

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

- The registered manager engaged well with people, their relatives, and staff.
- The registered manager sent out feedback forms to people and their relatives, and the care supervisor asked people for feedback during her spot checks and reviews.
- People told us that the registered manager would sort issues out quickly.
- There was an open-door policy at the office, and staff said they received good support from the registered manager.
- Staff felt confident in raising concerns and issues and said these were always addressed.