

Crediton Care Services Limited

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Inspection report

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Crediton
Devon
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27 June 2023

28 June 2023

29 June 2023

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Ratings

Overall rating for this service

Requires Improvement ●

Is the service safe?

Requires Improvement ●

Is the service caring?

Good ●

Is the service well-led?

Requires Improvement ●

Summary of findings

Overall summary

About the service

Crediton Care Services Limited is a domiciliary care service supporting adults in the community who require personal care in the Crediton 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 there were 20 people using the service who received personal care.

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

People told us they felt safe with staff, however the provider had failed to operate effective safeguarding procedures and escalate concerns in line with their policy. Recruitment processes were not consistently in line with legal requirements. This placed people at risk.

The governance systems in operation at the service had not identified that policy and legal requirements had not been followed evidencing they were not fully effective.

People had care plans in place and the people and relatives we spoke with told us the care provided to them met their needs. We identified that care records required further development to support staff in managing known risks and identify when escalation may be required.

There were sufficient staff to meet people's needs. The provider was currently experiencing staffing challenges and as a result has returned some care packages. At the time of our inspection Crediton Care Services Limited was not taking on any further packages. People told us they received the required level of support with their medicines and told us staff supported them whilst wearing appropriate personal protective equipment.

People commented very positively on the caring nature of staff and the support they received. People said they were involved in choices and decisions regarding their care and support and that their independence was promoted. A person we spoke with told us, "They are excellent. They are conversational, kind and caring. They have built a good liaison with me. They respect me as a person."

Without exception, every person and relative we spoke with told us they would recommend the service to others. Staff told us they were happy in their jobs and were keen to make a positive difference in people's lives. There was positive feedback from people, relatives and staff about the provider.

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

Rating at last inspection and update

The last rating for this service was Good (published 26 September 2017).

Why we inspected

This inspection was prompted by a review of the information we held about this service and the elapsed time since the service was last inspected.

Enforcement and Recommendations

We have identified breaches in relation to safeguarding, recruitment and good governance.

You can see what action we have asked the provider to take at the end of this full report.

The overall rating for the service has changed from Good to Requires Improvement based on the findings of this inspection.

Follow Up

We will request an action plan from the provider to understand what they will do to improve the standards of quality and safety. We will work alongside the provider and local authority to monitor progress. 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?

The service was not always safe.

Requires Improvement ●

Is the service caring?

The service was caring.

Good ●

Is the service well-led?

The service was not always well-led.

Requires Improvement ●

Crediton Care Services 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 2014.

Inspection team

The inspection was conducted by one inspector and an Expert by Experience with experience of care of older people. 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 service is required to have a registered manager. A registered manager is a person who has registered with the Care Quality Commission to manage the service. 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.

At the time of our inspection there was a registered manager in post who was also the provider.

Notice of inspection

We gave the service 48 hours' notice of the inspection. The provider was given short notice because the location provides a domiciliary care 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 27 June 2023 when we visited the location's office and ended on 29 June 2023.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. 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 the provider and a member of staff. We reviewed a range of records including records relating to the care and support provided. We reviewed additional records which included staff files in relation to recruitment, and various audits/reports relating to the quality and safety of the service.

After the inspection

After our visit we continued to seek feedback from people using the service, relatives and staff to obtain their views of the service provided to people. We received feedback from 10 people using the service and 4 relatives. We spoke with a further 3 staff members. We continued to seek clarification from the provider to validate evidence found.



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. At this inspection the rating has changed to Requires Improvement. This meant some aspects of the service were not always safe and there was limited assurance about safety. There was an increased risk that people could be harmed.

Systems and processes to safeguard people from the risk of abuse

- The provider had failed to consistently operate effective safeguarding procedures and escalate allegations of alleged abuse.
- During our inspection, we identified an event where an allegation had been made by a service user against a member of staff. Whilst a record of this allegation had been made by the staff member and reported to the provider, no further action had been taken.
- The provider had failed to act in accordance with their own policy by not taking any further action in relation to this allegation. This included reporting the allegation to the local safeguarding authority for them to act as necessary.
- CQC made a safeguarding alert to the local authority about this alleged incident.

The failure to operate robust and effective safeguarding procedures placed people using the service at risk. This was a breach of Regulation 13 (Safeguarding service users from abuse and improper treatment) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

- Whilst we identified process concerns, people we spoke with told us they felt safe. One person commented, "I can't praise them enough." A person's relative told us, "There is no abuse that I'm aware of. I have no concerns."

Staffing and recruitment

- Recruitment processes were not consistently safe which placed people at risk.
- Relevant pre-employment checks had not always been carried out in line with the requirements of the Health and Social Care Act 2008. In one recruitment file we reviewed, the provider had failed to ensure a full employment history had been obtained as required. Additionally, the dates of employment on the references did not correspond with that on the staff member's application form. This placed people at the risk of inappropriate staff being employed.

Whilst we did not find significant impact to people, unsafe recruitment processes presented a risk to some people. This was a breach of Regulation 19 (Fit and proper persons employed) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

- Staffing levels met the needs of the people using the service and nobody we spoke with told us a call had ever been missed and said they were told of any potential late visits.
- Comments we received from people included, "They are always on time. Their time keeping is very good."

The morning carer stays for 45 minutes and always gets the jobs done." A relative said, "Yes the carers do arrive as on the schedule. They are always prompt and stay the full time needed. We've adjusted the length of visit times as Mum's needs changed."

- People received a weekly rota which confirmed their appointment times and who would be supporting them. People told us they received the same regular care staff.
- Staffing rotas were planned in advance. Staff told us they had sufficient time between calls and the current rota system worked well.
- The provider was currently experiencing challenges with recruitment and had adapted the business accordingly by returning some care packages and placing a temporary hold on taking any further packages.

Assessing risk, safety monitoring and management; Learning lessons when things go wrong

- People's individual risks were identified. Care was planned based on people's individual needs to keep people safe.
- Where people had known risks, for examples in relation falls and skin integrity, some care records required further development to record risk mitigation measures staff could follow. This was communicated to the provider following our inspection.
- Whilst there were no formal monitoring systems in place to monitor visits, due to the size of the service, communication was frequent to ensure any calls that may run late were identified and communicated to management. This allowed action to be taken.
- Each person's care plan had an environmental risk assessment included which had been completed at their homes before the care staff attended. This supported staff to work in a safe environment.
- There were currently no clear systems in place to report and learn from any accidents and incidents. Whilst reported incidents were minimal, the benefits of a formal system to ensure learning and risk management were communicated to the provider.

Ensuring consent to care and treatment in line with law and guidance

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 to receive care and treatment when this is in their best interests and legally authorised under the MCA.

When people receive care and treatment in their own homes an application must be made to the Court of Protection for them to authorise people to be deprived of their liberty. We checked whether the service was working within the principles of the MCA.

- There was nobody subject to any deprivations on their liberty at the time of our inspection.
- The provider told us they knew how to assess people's capacity if they lacked capacity to make certain decisions.
- Staff received training in the MCA and how it applied to their roles as part of the providers continual training programme.
- Where people had a Lasting Power of Attorney in place, this was recorded. Relatives we spoke with told us they were involved in decisions, with one commenting, "I have Power of Attorney and they consult me regularly."

Using medicines safely

- People received their medications safely. People received varying levels of staff support when taking their medicines from prompting through to administration. The provider told us that only 3 people received direct administration support with medicines.
- People said the support they received from the service met their medication needs. One relative commented, "The carers give her medicines. They are kept in a locked cupboard in blister packs. What she is given is recorded."
- The provider had medicines policies in place. Training for staff was provided and medicines competency was assessed through spot checks in the community.
- There were governance systems in operation to help ensure medicines management was safe and met people's needs.

Preventing and controlling infection

- Staff received training in infection control to ensure good hygiene practices were delivered during care and support. The provider had supporting policies in place.
- The provider supplied staff with masks, gloves and aprons to use when supporting people with their personal care. This helped to minimise the risk of infections spreading.
- No concerns were raised in relation to infection control and staff practice. One person told us, "They still wear their kit. Always have it on in the morning. Carers have a uniform and put on an apron, mask and gloves. If it's very hot they ask if they can keep the mask off." Another said, "Yes they do [wear PPE]. They have on gloves, aprons and masks every morning. I've had no infections. Their hygiene is very good. They're not exposing me to any risks."
- There were systems to ensure that staff compliance with PPE and infection control practice was monitored.

Is the service caring?

Our findings

Caring – this means we looked for evidence that the service involved people and treated them with compassion, kindness, dignity and respect.

At our last inspection we rated this key question Outstanding. The rating for this key question has changed to Good. This meant people were supported and treated with dignity and respect and involved as partners in their care.

Ensuring people are well treated and supported; respecting equality and diversity

- Without exception, all of the people we spoke with were very positive about the care and support they received.
- The feedback we received from people and their relatives included, "The care is exemplary. This is the model of how to do care. It's a tight knit and close team. To the carers, mum is the Queen. They are very respectful to mum and I've never seen them grumble." Another comment was, "They are excellent. They are conversational, kind and caring. They have built a good liaison with me. They respect me as a person."
- Feedback in the last surveys completed with people and relatives about their care provision reflected the comments we received. One person said, "Nothing is too much trouble" and a relative described the service as, "Very professional, helpful and caring."
- Staff were committed to their role. One member of staff commented, "I go in and be myself with them and I tend to go that extra mile for them and I treat them like I would my own family."

Supporting people to express their views and be involved in making decisions about their care

- People were always involved in making day to day decisions about their care and felt their views and opinions were respected.
- Positive feedback was received around decisions being made with the staff who supported them. People commented that when staff identified changes in their needs, changes to their care delivery was discussed in partnership with them.
- One person we spoke with said, "Carers ask me how I'm coping with the day. Initially the manager came around and we made a care plan that is in the file. Any alterations since have been added. I led them in what I needed to be done and we worked together on it."
- Staff told us how they actively encouraged people to make decisions. One said, "We do encourage independence so we get them involved in their own care and we are doing everything we can to support them."
- People were encouraged to share their views through feedback systems operated by the provider as part of the service governance.

Respecting and promoting people's privacy, dignity and independence

- People and their relatives told us that staff always supported them in line with their needs and preferences and always with dignity and respect. People were positive about the level of independence afforded to them by staff.
- The feedback in relation to people being treated with dignity and respect was consistently positive. One

person said, "They are kind and caring. If I want to use the commode they ask me if I want to be left alone. They are ever so light-hearted and pleasant." A relative told us, "They are very polite and person centred. They always ask her what she would like and ask her opinion."

- Staff treated people with dignity and respect when helping them with daily living tasks. One staff member told us, "If it's a personal care situation, you always try doing it in as considerate and respectful way as possible."

- People's support plans detailed the level of support people needed to aid in empowering them to maximise what they could do for themselves.

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. At this inspection the rating has changed to Requires Improvement. Governance systems were not consistently reliable and effective. Some risks were not always identified or managed.

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

- There were systems in place to monitor safety and the standard of care provided, however we identified these were not always fully effective.
- Current governance arrangements had failed to identify the concerns identified during the inspection relating to the appropriate escalation, notification and management of safeguarding concerns. Systems and processes relating to recruitment had not identified legal requirements had not been complied with.

The absence of effective governance systems to identify and manage risks associated with safeguarding processes and recruitment practices was a breach of Regulation 17 (Good Governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

- There were quality assurance processes in the form of spot checks in the community and feedback surveys, however surveys had not been sent out for over 12 months due to operational demands.
- The provider had ensured that the current performance ratings were displayed within the service in line with 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

- There were appropriate policies in place relating to the duty of candour and the requirements of the provider should the need arise.

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

- People confirmed they knew who the provider was and told us they were approachable and easy to talk to.
- All of the feedback we received about the provider was positive. One person we spoke with said, "The owner comes in to have a general chat and see how it's going. She's the boss."
- People told us they felt involved in the care planning and reviews and that these happened regularly. People told us that if anything arose that they wished to raise about the service, they had no hesitation in doing so and felt they would be listened to and get a prompt response.
- All of the people we spoke with were happy to stay with Crediton Care Services Limited and without exception all said they would recommend to others. One comment received was, "I would recommend them

to anybody." A family member told us, "I'd very much recommend them. The main thing is they keep me in the loop and I'm kept aware. It's a small team who work well together. They communicate with me as well."

Continuous learning and improving care and working in partnership with others;

- There were surveys sent to people, relatives, healthcare professionals and staff as part of the ongoing business development. These were reviewed to ascertain what could be improved in the service. As previously highlighted, due to operational demands these had not been completed for over 12 months.
- The service worked with other health and social care professionals to meet people's specific needs. This included, for example, social workers from the local authority and health professionals such as occupational therapists.

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

- The provider had ensured people had the opportunity to express their views and opinions of the service and we saw records that supported this.
- Staff confirmed they were kept up to date with things affecting the overall service through frequent conversations. Periodic meetings were held when required.
- Staff spoke positively about their employment at the service and told us the leadership and management was of a high standard. One staff member, when asked about their employment said, "[It is] an enjoyable place to work and it's a good staff team."

This section is primarily information for the provider

Action we have told the provider to take

The table below shows where regulations were not being met and we have asked the provider to send us a report that says what action they are going to take. We will check that this action is taken by the provider.

| Regulated activity | Regulation |
|--------------------|--|
| Personal care | Regulation 13 HSCA RA Regulations 2014 Safeguarding service users from abuse and improper treatment The provider had failed to operate effective safeguarding systems and processes. Regulation 13(1)(2)(3) |
| Regulated activity | Regulation |
| Personal care | Regulation 17 HSCA RA Regulations 2014 Good governance The provider had failed to operate effective governance to identify and manage risks associated with safeguarding and safe recruitment practice. Regulation 17(1)(2)(a) |
| Regulated activity | Regulation |
| Personal care | Regulation 19 HSCA RA Regulations 2014 Fit and proper persons employed The provider had failed to operate consistently safe recruitment processes. Regulation 19(1)(3)(a) |