

# Hertsmere Valley Care Services 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 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 22 and 23 August 2017 and was announced. As part of the inspection process we contacted people who used the service and staff for feedback on the 23 August 2017. Hertsmere Valley Care Limited is a domiciliary care service which provides personal care and support to people in their own homes. The service was supporting 12 people at the time of our inspection.

There was a registered manager in place who was also the provider. 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 and associated Regulations about how the service is run.

When we last inspected the service on 02 and 03 May 2017 we found that although the service had made some improvements further improvements were required. The overall rating for the service was Requires Improvement at that inspection. Following the comprehensive inspection, the provider wrote to us to tell us how they would make the required improvements.

At this inspection we found that the provider had made the necessary improvements and was meeting the regulations of the Health and Social Care Act. People told us they received care and support that met their individual needs and preferences. People were involved in the development, planning and review of their care. Care plans were personalised and contained detailed information about people's support needs and risk assessments were detailed and specific providing staff with all relevant information to help ensure risks were both identified and mitigated where possible

Staff knew people well, supported them to retain their independence and treated them with dignity and respect. Staff were able to demonstrate a good knowledge of safeguarding procedures and knew how to recognise and respond to any allegations of abuse. Medicines were managed safely, staff had received training in the safe administration of medicines and had their competencies checked.

People were supported by sufficient numbers of staff and these were recruited through a robust process which helped to ensure staff were suited for the roles they employed. Staff had received an induction and received on-going training and support. Staff had opportunities to attend team meetings and had individual meetings with their line manager to discuss any concerns.

People were supported to make their own decisions, and to retain where possible everyday living skills and abilities and their choices were respected. Their views were obtained through various systems in place to obtain feedback. People's views were taken into account and acted upon appropriately.

There were systems and processes in place to monitor and improve the service to achieve a consistently good standard of care and support for everyone who used the service. There was a call monitoring system in place and spot checks were completed to help monitor the visit times.

## 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 ●

Staff were knowledgeable about abuse and how to report any concerns.

There were sufficient numbers of staff available to meet people's needs at all times.

People were supported by staff who had been recruited through a robust recruitment process.

People's medicines were managed safely and staff had their competency checked.

### Is the service effective?

Good ●

The service was effective.

People received support that was effective in meeting their assessed needs.

Staff received an induction and training and were well supported.

Staff obtained people's consent before supporting them. Staff were aware of MCA principles.

People were supported to eat and drink sufficient amounts to maintain their health and well being.

People were supported to access health care services when required.

### Is the service caring?

Good ●

The service was caring.

People were treated in a kind and caring way.

People were involved in the review and development of their care plans.

Staff knew about people's individual preferences and routines.

People were treated with dignity and respect and their privacy was maintained.

### Is the service responsive?

Good ●

The service was responsive.

People were encouraged to be involved in decisions about their care where possible and appropriate.

Peoples views were sought and acted upon.

There was a complaints process in place and people's concerns were acted upon.

### Is the service well-led?

Good ●

The service was well-led.

People, their relatives and staff felt the service was well managed.

The provider had systems and processes in place to monitor the quality and safety of the service.

The management was open, transparent and inclusive.

# Hertsmere Valley Care Services 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 was meeting the legal requirements and regulations associated with the Health and Social Care Act 2014 and to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

We undertook a follow up comprehensive inspection of Hertsmere Valley Care Limited on the 22 and 23 August 2017. We gave the provider notice of the inspection to ensure the correct people would be available to assist us with our inspection. Before our inspection we reviewed information we held about the service. The inspection was undertaken by two inspectors. We inspected the office location and contacted people who used the service and staff to obtain feedback about their experiences of the service.

During the inspection we spoke with four people who used the service and or their relatives, we spoke with three care staff, the office manager and care co-ordinator and the registered manager who was also the provider. We also received feedback from professionals involved in supporting people who used the service. We viewed six people's care plans and four staff recruitment files. We also looked at staff support arrangements and other records relating to the overall management of the service.

# Is the service safe?

## Our findings

At the previous inspection carried out at Hertsmere Valley Care in May 2017 we found that people were not always supported safely or in a timely way. However at this inspection we found that the registered manager had made improvements and demonstrated they supported people safely. Recruitment processes had been improved and detailed and consistent checks were in place.

People we spoke with told us they felt safe receiving care and support from staff from Hertsmere Valley Care. One person told us, "I feel safe, I trust them no question of that." A relative told us, "[Relative] is definitely safe, she gets the same carers". While a third person said, "I feel very safe, I know they are coming to see me and if they are a bit late it does not matter, they do take care of me very well and it means I can continue to live in my own home which is marvellous".

Staff were knowledgeable about the risks of potential abuse and how to report any concerns they had to the registered manager or if required to elevate concerns to the local safeguarding authority. There was a comprehensive safeguarding policy in place and evidence of training and updates.

People had their individual risks assessed and staff were knowledgeable about safe working practices. We saw that risk assessments and care plans included details about what measures staff had to take to mitigate risks to people. For example moving and handling people, the information contained within the risk assessment was specific to the individual and detailed how the person should be transferred safely.

People told us there were enough staff to meet their needs at all times. One person said, "I get the same small group of staff and I get the help when I need it." Another person said, "Yes I am sure there are enough staff". Staff we spoke with told us they had enough time to support people and to enable them to travel in between visits. One staff member told us, "We have enough staff it's only a problem when there are road works and sometimes a lot of traffic in the mornings".

Recruitment was completed robustly with all appropriate pre-employment checks having been completed. Files were presented with evidence of three verified references, criminal record checks, eligibility to work in the UK and proof of address and previous qualifications. There had been no new recruitment since the last inspection. However all the existing recruitment records had been updated.

People received their medicines safely by trained staff who had their competencies checked regularly. We found that medicine administration records (MAR) were completed accurately and signed by staff each time after they administered people's medicines. There was a medicines policy in place. A new (MAR) had been devised and we saw the records for June and July 2017 and found them all to be accurate and signed off by the registered manager. This demonstrated the system for monitoring staff by observation was in place and the audit system was now set up

# Is the service effective?

## Our findings

At the previous inspection carried out at Hertsmere Valley Care in May 2017 we found that people were not always supported effectively. Consent was not always obtained. Staff were not consistently supported or trained. At this inspection we found that the registered manager had made improvements and demonstrated they supported people effectively. Staff were being supported regularly, received induction and on-going training and had regular supervision. People were asked for their consent to care and MCA principles were followed.

People were supported by staff who had received training and support to enable them to carry out their roles effectively. One person told us, "I think they are well trained, they were very careful with my ulcerated ankle" and, "I provide my own meals, but they help me get washed". A relative told us, "They always asks [relative] what she wants, everybody knows what they are doing."

Another person told us, "The staff seems to know what they are doing and I know they have had training but I don't know what training". A relative said, "I feel comfortable and confident with the experience and abilities of the staff who support [Name]."

Staff told us that they had an Induction and there was a training plan and record in each file we looked at covering topics such as continence promotion, risk assessments, infection control, nutrition, dementia, and mental capacity act (MCA) safeguarding, and first aid. We also saw that staff received on-going training in various topics relevant to their roles and responsibilities. We saw that staff had received training in how to safeguard people from harm, administration of medicines and moving and handling. One staff member told us, "We have had plenty of training and have regular meetings with our line manager to discuss our performance and any concerns we have about the people we support".

The system for supervision was set up for three monthly meetings, notes of these meetings were comprehensive and covered areas such as strengths, weaknesses, review of work performance, and training needs.

Staff told us they felt they were well supported by the registered manager and the office staff. One staff member said, "I think things have improved and we have had a lot of training. I do think we get good support and can always speak to [Name]". There was a system in place 'people planner' to alert managers when training was due. We also saw evidence that this was discussed in supervision and team meetings. The coordinator told us they now had a training officer who provided the training and a training room was available on site.

People told us staff asked for their consent before they supported them and staff confirmed they were aware of the need to obtain people's consent. One person said, "The care staff always asks shall we get your breakfast or do you want to get dressed first". People confirmed that staff always offered them choices. Where people were not able to consent their care was discussed with their family members where appropriate to help ensure the care people received was in their best interest and was appropriate to meet

their needs.

The registered manager and office staff showed a good understanding of MCA. There were appropriate assessments in both files we reviewed. For example one relative told us, "[Name] is able to make simple choices, but needs assistance with more complex decisions". We saw that consent forms were completed and signed. All staff had now completed training in MCA as part of the care certificate.

People told us they were supported to eat and drink enough to keep them healthy. One relative told us, "They know what she likes to eat better than me." Another person told us, "They always offer a cup of tea when they arrive and leave me a drink for later". We saw that care plans contained very detailed choice of food/dietary requirements.

People were supported to access health and social care professionals when required. One person told us, "I don't need help to call the GP but it's good to know I can ask them [Staff] for help if I need it."



## Is the service caring?

### Our findings

At the previous inspection of Hertsmere Valley Care in May 2017 we found that people were supported by staff who were kind, caring and compassionate. At this inspection people told us the staff continued to be kind and caring.

People told us they were happy with the service, care and support they received. They told us staff were kind, caring and understood their needs very well. One person told us, "They are very kind and they treat me with respect, they look after me very well". A relative of a person who used the service told us, "My [relative] has had the service for about 18 months, I can't fault them they are marvellous, [relative] is so much happier and she has a good relationship with her carers they really try to do their best, and nothing is too much trouble".

People and their relatives also spoke positively about the registered manager and the office staff and said they were helpful whenever they had any dealings with them and tried their best to resolve anything they could. People told us they had support from a small team of staff and they had got to know them well. One person told us, "They always respect my dignity by giving me privacy when they help me to wash and dress".

Care staff and the registered manager demonstrated that they knew people very well. When they spoke to us about the people they supported they were able to tell us in detail which confirmed how well they had got to know people's individual routines and preferences about how they liked to be supported.

People and where appropriate their relatives, were involved in the development, planning and review of their care and support plans. Care and support plans were personalised and detailed and recorded people's preferred routines and wishes. People's care records contained a 'profile' giving staff information to help them understand about people's life histories. This helped staff to understand people's backgrounds and what was important to them.

Records were stored securely and staff respected people's confidential information.

## Is the service responsive?

### Our findings

At the previous inspection carried out at Hertsmere Valley Care in May 2017 we found that the service was not always responsive to people's individual needs and wishes. People did not always get their visits at the agreed time and the service was not very flexible in meeting people's changing needs. The complaints process had not been implemented to ensure it was responsive and that complaints were logged appropriately. People had been asked for their feedback but this had been a recent change and needed to be developed to enable the service to demonstrate they were responsive when concerns were raised.

At this inspection we found that the registered manager had put systems and processes in place including an online rostering system to help ensure people got their visits at a time that suited them. A complaints system had been established and people had been asked to provide feedback and their views were taken into account where possible.

Care plans were personalised, and contained information including people's likes and dislikes, and personal history as well as recording a timetable of visit times detailing what support people would require at a specific time. One person told us, "I have no problems they usually arrive at the correct time and we have had meeting with [Name] to discuss [relative's] care". Another person told us, "We have never had any missed visits. We have a regular carer who comes all the time".

We saw that where people's needs changed they had a review of their care and the plan was amended to reflect their changing needs. People were, where possible involved in making decisions about the times they preferred their visits to take place.

We found that people we spoke with told us they were aware of how to raise a concern or make a complaint if they needed to. Concerns were documented along with details of how the concern was investigated and a satisfactory outcome achieved.

People had been asked to complete a survey to enable them to provide feedback about how the service was and to share their experiences and identify where improvements could be made. Where any shortfalls were identified these were addressed in a timely way. Information was kept under review to ensure they were able to learn from past experiences.

We saw that people had been visited in their homes and had a spot check done to ensure staff arrived at the planned time, had their ID and followed the care plan. People told us they felt assured that if they raised any concerns, they would be listened to and acted upon and were confident that the registered manager would view any feedback in a positive light as a means to improving.

# Is the service well-led?

## Our findings

At the previous inspection carried out at Hertsmere Valley Care in May 2017 we had found that the service was not consistently well led or well managed. Record keeping was not robust and there were inconsistencies in the way information was recorded and updated. The out of hours support arrangements were not sufficient and no records were kept in respect of any activity outside office hours. The registered manager had put some systems and processes in place to monitor the quality of care people received. However this had required further development to ensure its effectiveness.

At this inspection we found that improvements had been made in respect of all the areas where we had previously identified shortfalls.

Records were presented in a consistent way and had been properly maintained and updated. Information contained people's names and dates so we could see who they related to and that they were current. Other records which were no longer required had been archived.

We found that people were positive about the service they received and the way the service operated. The registered manager had established systems and processes to help ensure the quality and safety of the service was monitored. Any shortfalls were addressed. They had also commissioned some additional mentoring support and training to help implement robust systems and processes which were sustainable. For example additional measures were now in place to strengthen the recruitment process, staff competency was being monitored and quality monitoring visits were undertaken.

The registered manager had also arranged additional training for staff and had provided them with individual supervision to help their development and to give them an opportunity to discuss any issues or concerns they might have. We found the registered manager had responded effectively to feedback from the previous inspection and was operating in an open and transparent way. They demonstrated that they wanted to make the improvements and provide people with a good quality service.

We found that there had been improvements in the systems to monitor and review the service. Audits were established and the registered manager was were obtaining feedback from people who used the service and staff to ensure people were given opportunities to shape the future of the service. Staff had clear roles and responsibilities and felt valued and motivated.

The out of hours service had been improved with proper records being kept and people's calls being responded to in a timely way. The registered manager demonstrated they had made improvements across the service which were being implemented and embedded to ensure there was a firm structure from which to build, develop and make continual improvements.