

Care Herts Limited

# Care Herts Limited

## Inspection report

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## Ratings

Overall rating for this service

Good ●

Is the service safe?

Requires Improvement ●

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

We undertook an announced inspection of Care Herts on 08 December 2015. We told the provider 24 hours before our visit that we would be coming to ensure we could access the information we needed. We spoke with people who used the service and staff members on 10 December 2015 to obtain their views about the service.

Care Herts provides personal care to people in their own homes. At the time of our inspection 23 people used the services of Care Herts with 21 people receiving personal care. People who used the service funded their own care privately or through direct payments.

The service had a registered manager in post. 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.

This was the first inspection of Care Herts since registration in December 2014. Whilst we found there were some areas of the service provision that were not fully meeting the requirements of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010 it was clear that the registered manager was already making the necessary improvements.

People and their relatives felt that the service provided was very good and that they felt safe and secure. The registered manager demonstrated that they understood their role and responsibilities in relation to safeguarding vulnerable adults however; some staff members needed further support in this area. The registered manager was proactively working to address some shortfalls in their recruitment processes and to ensure that a robust recruitment procedure was operated going forward. There were sufficient numbers of staff available to meet people's individual support and care needs. People who received support with their medicines told us that this was provided safely. However the staff team had not been provided with practical training to support them to manage medicines safely and had not had their competency assessed in this area.

People who used the service told us that they had confidence in the staff team that provided their care and support. Staff members were provided with an induction when they started to work with the agency and on-line basic core training. They were supported by the registered manager and had regular 1:1 meetings where they could discuss any concerns either about people's care or their own personal development. The registered manager carried out spot checks of staff performance to help ensure that people received the standard of care they expected to receive. People's choice was central to the care they received. People were supported to attend GP and specialist health appointments.

People told us that they experienced warm and understanding care from the staff team. Staff members were proud to work for Care Herts and told us that this was because everyone who worked for the service had a

caring attitude. Staff respected and promoted people's dignity and people felt that they mattered.

People who used the service and their relatives told us that they always felt involved and said the service was flexible and able to meet their needs. People's care and support needs were kept under review to help ensure that they continued to be met. People who used the service felt confident to raise any concerns and were confident that they would be managed appropriately.

Staff said that they were fully supported by the registered manager. People's views about the service provision were gathered regularly to help the registered manager assure themselves that the service they provided was safe and was meeting people's needs.

## The five questions we ask about services and what we found

We always ask the following five questions of services.

### Is the service safe?

**Requires Improvement** 

The service was not always safe.

The registered manager was clear about their role in safeguarding vulnerable adults however, some of the staff team were not clear about how to report safeguarding matters outside the organisation.

People's medicines were managed safely. However, people's support plans around medicines need more detail and the staff team had not received practical training or had their competence to administer medicines assessed.

The registered manager was in the process of strengthening the recruitment processes to ensure that people's employment history was explored and their identity was confirmed prior to working for the agency.

### Is the service effective?

**Good** 

The service was effective.

Staff had been provided with training to meet the needs of the people who used the service. However, much of the training provided had been via e-learning and did not involve practical training or test staff competencies.

Staff received regular support from the registered manager.

Staff sought people's consent before providing all aspects of care and support.

People were provided with support to eat where needed.

People were supported to access health care professionals as necessary.

### Is the service caring?

**Good** 

The service was caring.

People were treated with warmth, kindness and respect.

Staff had a good understanding of people's needs and wishes and responded accordingly.

People's dignity and privacy was promoted.

### **Is the service responsive?**

**Good** ●

The service was responsive.

People's care and support needs were kept under regular review.

People were supported to engage in a range of activities.

People's concerns were taken seriously.

### **Is the service well-led?**

**Good** ●

The service was well led.

People had confidence in the staff and the management team.

The provider had arrangements in place to monitor, identify and manage the quality of the service.

The atmosphere at the service was positive, open and inclusive.

# Care Herts 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 met 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 under the Care Act 2014.

This inspection took place on 08 December 2015 and was announced. The provider was given 24 hours' notice because the location provides a domiciliary care service; we needed to be sure that someone would be available and that we could access the information we needed. The inspection team consisted of two inspectors.

Before the inspection, we checked the information that we held about the service and the service provider and we received feedback from the local authority quality monitoring team. As part of this inspection we spoke with four people who used the service, relatives of four people who used the service, three staff members and the registered manager.

We reviewed care records relating to two people who used the service and other documents central to people's health and well-being. These included staff training records, medication records and quality audits.

# Is the service safe?

## Our findings

People who received support with their medicines told us that this was provided safely. They said that the registered manager visited each person who used the service with new staff members to show them how each individual required to be supported with their medicines. However, we discussed medicines practice with the registered manager and staff team and found that they were not completely clear about the differences in prompting people to take their medicines and administering people's medicines. We found that medicine support plans lacked specific information about people's allergies, the level of support people needed, and GP and pharmacy contact details. Staff had received on line medicines training however they had not all received practical training and had not been assessed regarding their competency to administer medicines. The registered manager acknowledged that this may not always be appropriate if the staff member had not previously received face to face training and was able to confirm that they were in the process of arranging face to face training for the staff team.

The registered manager had not always operated robust recruitment practices and this had been identified by a local authority representative. We found gaps in people's employment history that had not been explored and copies of identity documents that had not been countersigned by the manager to confirm that the originals had been seen. The registered manager acknowledged this area of shortfall and showed us that they had audited all staff files and contacted the staff concerned to request missing information such as gaps in employment. They had asked staff to bring in original identity documents so that they could sign and confirm that the copies in the files were genuine. This showed that the registered manager was proactively working to address the identified shortfalls and to ensure that a robust recruitment procedure was operated going forward. We spoke with a recently recruited staff member who told us they had completed a written application form, attended a face to face interview and that they had not been able to start to work at the agency until satisfactory references and a criminal record check had been received by the registered manager.

People who used the service said they thought that the service they received was very good and that they felt safe and secure. One person told us, "I am very happy. I have regular staff until they go sick but the manager always rings me to tell me who will be coming instead."

Relatives of people who used the service told us they were satisfied with the service that people received and that they felt it was safe. A relative said, "[Person] is nervous and anxious but staff tell them everything they are going to do and this makes [person] feel safe and makes me feel confident that [person] is getting safe care." Another relative said, "The staff team at Care Herts are really very good. They listen to everything you say to them and take it on board. It helps me to relax knowing that [relative] is receiving care that is safe. It is an absolute delight to be confident that the care staff will do what they are supposed to do without me constantly having to check."

All staff had undertaken on-line safeguarding training and the majority of the staff team had received face to face training in this area from previous organisations prior to joining Care Herts. The registered manager told us that they were in discussions with a local training provider to source face to face training for the

whole staff team. The registered manager was able to demonstrate that they understood their role and responsibilities in relation to safeguarding vulnerable adults and gave an example where they had raised an issue with the local authority team regarding a person with a pressure sore. Some staff we spoke with were not confident about who they would report safeguarding concerns to outside the agency. However they said that they would report any concerns to the registered manager and were confident that they would deal with it appropriately.

Assessments had been undertaken to assess risks to people who used the service and to the staff who supported them. These included environmental risks and those relating to the health and support needs of the person. Some assessments were more detailed than others however; all staff we spoke with were knowledgeable about the support people required and the actions to be taken to mitigate risks. For example to assist a person to walk with the aid of a walking frame and a staff member by their side to provide support.

An occupational therapist (OT) worked closely with the registered manager to provide support and guidance relating to people's moving and handling needs. For example, a person's needs had escalated as their mobility decreased and an OT had been contacted for an assessment. Assessments undertaken by the OT were clear and detailed and provided concise guidance for staff to follow to help them support people safely. For example, 'The size small support vest should be used with the standing hoist with the straps fastened on the second furthest hooks. [Person] should have their arms outside of the support vest and hands holding onto the handle bars when being assisted to stand/sit. They should be encouraged to put strength through their legs when the hoist lifts them and asked to lean backwards slightly.' This showed that the registered manager was aware of the potential risks to people's safety and that they took the necessary actions to reduce the risk where possible.

There were sufficient numbers of staff available to meet people's individual support and care needs at all times, including during the night and at weekends. People who used the service and their relatives praised the registered manager and staff for the consistent and reliable care and support provided. A person who used the service said, "We are over the moon with the service we receive from Care Herts. We always know who is coming to provide the care because we get sent a printed sheet each week and the manager calls us if this changes at all." A relative told us, "We are very happy, [relative] gets consistent care from regular care staff, they arrive on time and they are reliable. We have a regular team of care staff so even if someone goes off sick we know the replacement staff."

Staff told us that rotas were arranged to include planned travel time between each visit which helped them to be punctual. The manager told us that the travelling time was variable depending on the distance between calls and that it was arranged to reduce the risk of staff arriving late to provide people's care and reported that the agency had not had any missed visits.



# Is the service effective?

## Our findings

People who used the service told us that they were satisfied with the staff team that provided their care and support. A person told us, "The staff really do know what they are doing. I think they are a lovely bunch of girls, I simply can't fault them."

Staff told us that when they started to work for Care Herts the registered manager introduced them to each person who used the service. This meant that each staff member was advised about people's individual care and support needs and that each person who used the service had the opportunity to meet the staff members before they visited them to provide care. Staff told us that they shadowed experienced staff members when they started working for the agency to learn about people's individual needs. Staff members told us that they had attended first aid training and had completed various online training courses including safeguarding, infection control, safe moving and handling, fire safety, food management and medicines.

Much of the training provided since the agency had started operating had been via e-learning. The registered manager reported that all the staff had previous care experience and had undertaken face to face training in their previous roles however, was not able to provide evidence of this for all staff. The registered manager had liaised with an external training provider to access face to face training for the entire staff team in the basic core areas such as safeguarding, moving and handling and medicines.

Staff members told us that they felt supported at all times and were able to meet with the registered manager at any time. They told us they had regular 1:1 meetings where they could discuss any concerns either about people's care or their own personal development. The registered manager confirmed that staff members received formal 1:1 supervision every four months and that issues discussed included timekeeping, record keeping, communication, working hours and personal development needs. Staff also told us there were regular monthly team meetings where practice issues were discussed.

The registered manager carried out spot checks of staff performance to help ensure that people received the standard of care they expected to receive. These spot checks covered such areas as record keeping, time keeping, aspects of personal care delivery, appearance, moving and handling technique's, following agreed plan of care and communication. We reviewed the records for one of these spot checks and noted that the registered manager had identified staff had not adhered to a person's moving and handling care plan. We noted that this had been addressed with the staff member at the time and subsequently during supervision. This meant that the registered manager continuously monitored and improved care practices.

The Mental Capacity Act (2005) provides a legal framework for making particular decisions on behalf of people who may lack 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. Where 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 checked whether the service was working in line with the principles of the MCA.

People who used the service told us that staff checked with them that they were happy with support being provided on a regular basis. Staff told us that people's choice was central to the care they provided. One person said, "It is all about their choice, it would be wrong for us to do anything that people were not happy with." People had signed their care plans to consent to the care package agreed where they had capacity to do so. Where people did not have the capacity to understand or did not wish to be involved with the mechanics of the process family members acted on their behalf. The registered manager told us that the staff team had not yet received training about the MCA however; we saw evidence that this had been discussed with an external training provider.

The support provided by the staff team in relation to food varied dependent on people's individual needs. One person told us that staff prepared their main meal of the day for them and said that the food was always very good. Another person said that their relative prepared the food but staff supported them to eat. All staff members had undertaken basic food hygiene e-learning to support them to prepare food for people in their own homes. The registered manager told us that staff were encouraged to take photographs of meals that they had prepared for people and these were entered into an annual competition with an award given for the most attractively presented meal.

People were supported to attend GP and specialist health appointments. People's relatives praised the team at Care Herts for the support provided and gave an example of when staff had contacted a GP when a person had appeared unwell.

# Is the service caring?

## Our findings

People who used the service gave us positive feedback about the staff team and said that they were experienced, kind and understanding when they provided care to people. A person who used the service told us, "I am extremely happy with the care and support I receive from Care Herts; it is the best company I have come across. They actually care about people and not just about making money. The staff are all very good; I don't have a bad word to say about any one of them."

Relatives of people who used the service praised the management and staff. One person said, "I don't know how the manager has managed to recruit such a good group of girls, they are marvellous." Another relative told us, "They know [relative] and [relative] knows them. [Relative] communicates by sounds and gestures and they understand. It is exactly the care and support we need, they are really good."

Staff members were proud to work for Care Herts and told us that this was because everyone who worked for the service had a caring attitude. One person said, "The thing I like is the staff are all very caring people, they follow everything through properly."

People told us that staff respected and promoted their dignity. A person told us that they always knew the staff who delivered their care because they had a regular team and this made them feel comfortable. A relative said, "The staff talk to [Person] whilst they are providing the care, they don't just chat between themselves." They said that this made the person feel that they mattered. Another relative told us, "We were nervous due to a previous experience of poor care but the staff from Care Herts are so open and supportive it is a delight to have them in the house."

The support that people received was meaningful and helped ensure that people felt cared for. A person's relative told us, "Because they do things properly it means that [relative] feels relaxed and happy." Another relative said, "They ask [relative] if they are comfortable and help them to adjust their position if not."

When people first started to use the service they were introduced to the staff who would be visiting them at home to provide personal support. People told us they found it reassuring to know in advance who would be coming to provide their care. Newly recruited staff were also introduced to the people they would be supporting as part of their induction and shadowed established staff. Staff told us that this enabled them to start to build a bond with people before they started to deliver their personal care.

People who received personal care from Care Herts had capacity to make their own decisions at the time of our inspection. Those people who funded their care through direct payments had made the choice to use Care Herts and had a contract in place outlining the expectations of both parties. For some people it was their family members that had made the decision to use the services of Care Herts in conjunction with the wishes of the person.

People's personal and private information was well organised and securely stored in a locked cupboard. We

saw from team meeting minutes that confidentiality was a topic on the agenda at every team meeting. Staff told us that the registered manager constantly reminded them of the importance of confidentiality and how important it was to respect people's right to privacy and respect.

## Is the service responsive?

### Our findings

People who used the service and their relatives told us that the registered manager visited them more than once prior to the care package starting in order to be confident that the proposed plan of care was appropriate to meet their needs. Everyone we spoke with told us that they felt they 'owned' their care package and would be confident to contact the registered manager if they felt that changes to the plan of care were needed.

A person who used the service told us that they always felt involved and said, "Care Herts is an excellent service, I have never had any problems, they have always done exactly as I want, it is perfect." Another person said that the service was flexible and able to meet their needs, they said, "If I need more support I call the agency and they arrange this for me."

Relatives told us that they found the service provided to be responsive to their needs. One person said, "I only have to ring the manager if we have any urgent needs and they will have a staff member with us within 15 minutes or the manager will come out to help us herself." Another relative told us, "The service they provide is very personal, it is tailored specifically to our needs, it is wonderful."

People's care packages had been developed in partnership with them or their relatives. Some people who used the service said they liked being in control of how their care was delivered whereas others told us they preferred their family members to make all the necessary arrangements on their behalf.

Assessments had been undertaken to identify people's individual needs and care plans were developed to provide guidance for staff to be able to provide the support necessary to meet these needs. We noted that some care plans would benefit from more person centred detail. For example, people's ethnic and religious backgrounds were identified in the care plans but there was no information as to how staff should provide support in relation to these. Where people had limited communication due to language barriers or hearing loss there was no information to guide staff about how people could communicate with them. People who used the service and the registered manager said that, because the agency was small this was not currently an issue as staff knew people well and understood their individual needs. However, it was acknowledged that this was an area that needed improvement.

People told us that their care and support needs were kept under review to help ensure that they continued to be met. One person said, "The manager regularly visits and asks me if everything is OK." Relatives said they had regular contact with the registered manager. One relative told us, "The manager comes to see us now an again to make sure that the staff are doing what they are supposed to do."

Staff gave us an example of where a person's needs had escalated and they felt more time was needed for them to encourage the person to receive support to eat their meal. Staff told us that they reported this to the registered manager who immediately arranged to visit the person and assisted the person to eat in order to accurately assess the time required. We noted that the care plan and visit times had been adjusted to meet the person's needs in consultation with the person's social worker. This showed that the service provided

was responsive to people's changing needs.

Some people received support to engage in social activities. A person who used the service told us, "I bake cakes with some of them; it is so nice to have someone to do things like that with and to talk to. Sometimes we go to the garden centre, it is nice to have a look around and have a cup of tea and a bun with someone."

The complaints process was included in information given to people when they started to use the service and a copy was in people's care files maintained at their home. The registered manager reported that they had not received any formal complaints and that just a couple of minor issues had been shared with them verbally by relatives. The registered manager showed us a tracking document that they had devised in order to maintain an overview of any concerns brought to their attention so that any patterns or emerging trends could be clearly identified and managed.

## Is the service well-led?

### Our findings

People who used the service gave positive feedback about the registered manager and how the service was provided. One person said, "I have faith in the manager, she checks with me about once a month and asks if everything is OK." People told us that the registered manager involved them in how the service was run and it made them feel included. One person said, "The manager arranged a get together where we were able to meet other people who are in the same position as ourselves, it was such a good idea."

Relatives of people who used the service praised the registered manager for their compassion and empathy and said that they were kind and approachable and was always open to any suggestions made. One person said, "I have seen care agencies come and go – there is no comparison with Care Herts, they are the best. I can't fault them." Another relative told us, "I trust the manager, you can always talk with her and she listens to us. I have every faith in her and if I could give her an award I would."

Staff told us that they found the registered manager to be fair, reasonable and approachable and told us that they felt the service provided people with a good standard of care. One staff member said, "The manager is excellent; she is brilliant at what she does. She keeps us up to date with monthly meetings and you can approach her about anything at all." Another staff member told us, "I would rate this agency as 10 out of 10. I know this is a learning curve for the manager but she is very experienced, caring and approachable." The staff member went on to say, "She goes the extra mile for people, she arranged a party for people who use the service to get together. There were awards presented to staff for areas of good performance. It was so nice for the staff to get positive feedback and motivation."

Staff told us that they were proud to work for Care Herts. One staff member said, "This is an excellent service to work for, it gives me a huge sense of pride to know that I am working for a good company." Another staff member told us, "I think it is a very positive company to work for. The manager has a good heart. She has compassion and she does go the extra mile to sort any issues for people."

Staff members confirmed that regular staff meetings were held where they were able to meet as a team to discuss various matters relating to their role including specific care issues, training matters and confidentiality. We asked staff about what they would do if they required support out of hours. A staff member said, "Out of hours? The manager doesn't have 'out of hours' she answers the phone no matter what time you ring her." This showed that staff felt supported in their roles.

The registered manager was in the process of undertaking a diploma in leadership for health & social care which they feel will be completed by March 2016. The registered manager told us that they intended to attend all basic core training alongside the staff team to ensure that her skills and knowledge are kept up to date as well as to assess the quality of training provided for the team.

At the time of this inspection the registered manager was responsible for undertaking all management tasks associated with running the agency as well as covering care visits when staff went off sick. We discussed that this was not practical or sustainable in the long term. The registered manager acknowledged this and

advised us that they had plans to appoint a field work supervisor to support with arranging rotas, undertaking spot checks and other day to day management tasks.

The registered manager undertook unannounced spot checks at people's homes to assess the quality of the care that staff provided for people. We saw an example where the registered manager had identified that there was a lack of detail in a call log and had followed this up with the staff member through supervision. This showed that the manager had systems in place to assess and monitor the quality of care delivered and to address any identified shortfalls.

The manager surveyed the views of people who used the service and their relatives every six months to gain an understanding of their satisfaction with the service they received. A summary of responses had been developed from a survey undertaken in November 2015 and this showed that all eleven people who had responded were satisfied with the care and support they received. One person had commented, "It is so nice to have found a care company that actually cares from the management down through the staff. It has made a great difference to [relative's] recovery and we thank you for that."

The registered manager told us that they visited each person in their own home to ensure their continued satisfaction with the service provided at least once a month. They told us that they were intending to start recording this activity so that it could contribute to the on-going quality monitoring of the service.