

County Carers Limited

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Inspection report

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Ratings

Overall rating for this service

Requires Improvement 

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?

Requires Improvement 

Summary of findings

Overall summary

About the service

County Carers Ltd provides domiciliary care services to people within their own homes. This can include specific hours of required support or live in carers to help promote the person's independence and well-being.

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 the service was providing personal care to 45 people.

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

Recruitment processes were in place however they were not as robust as they should be, to ensure as far as possible, that people were protected from staff being employed who were not suitable.

The registered person did not use their quality assurance systems to monitor the running of the service, ensuring appropriate records were in place and ensure compliance with all the fundamental standards. The registered person did not always maintain clear and consistent records to show their Duty of Candour responsibility was applied as per regulation.

People were protected from the risks of abuse and said they felt safe with the staff providing their support and care. The registered manager had the knowledge to identify safeguarding concerns and acted on these appropriately. Risks to people's personal safety had been assessed and plans were in place to minimise those risks. Staffing levels supported people to stay safe while living as independent a life as possible. The registered manager scheduled visits, so the same staff went to see people to maintain continuity of care and support. People were informed about the changes to their visits as necessary. Medicines were handled correctly and safely.

People felt they received effective care and support from staff who knew them well and were well trained. The staff monitored people's health and wellbeing and took appropriate action when required to address concerns. People's rights to make their own decisions were protected. 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 were treated with care, respect, kindness and their dignity were upheld. This was confirmed by people and their relatives who provided feedback. People were consulted about their care and support and could change how things were done if they wanted to. People's diverse needs were identified and met and their right to confidentiality was protected.

People confirmed they received care and support that was personalised to meet their individual needs. The

registered manager and staff worked well together for the benefit of people and were focused on the needs of the people using the service.

The registered manager praised the staff team for their hard work and appreciated their contribution to ensure people received the best care and support. People benefitted from receiving care from staff who were happy in their work and felt well managed and supported. The registered manager encouraged feedback from people and families, which they used to make improvements to the service and protected people against the risks of receiving unsafe and inappropriate care and treatment.

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

Rating at last inspection

The last rating for this service was good (published 27 February 2017).

Why we inspected

This was a planned inspection based on the previous rating.

Enforcement

We have identified breaches in relation to regulation 17 and 19 of The Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 at this inspection. Staff recruitment was not always robust; effective systems and governance overview were not used to ensure the service met the required fundamental standards of care.

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

Follow up

We will continue to monitor information we receive about the service until we return to visit as per our re-inspection programme. If we receive any concerning information we may inspect sooner.

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.

Details are in our safe findings below.

Requires Improvement ●

Is the service effective?

The service was effective.

Details are in our effective findings below.

Good ●

Is the service caring?

The service was caring.

Details are in our caring findings below.

Good ●

Is the service responsive?

The service was responsive.

Details are in our responsive findings below.

Good ●

Is the service well-led?

The service was not always well-led.

Details are in our well-led findings below.

Requires Improvement ●

County Carers 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 Care Act 2014.

Inspection team

This inspection was carried out by one inspector and one assistant inspector. An Expert by Experience made telephone calls to interview people or their relatives. 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.

The service had a manager registered with the Care Quality Commission. 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.

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.

What we did before the inspection

Before the inspection we looked at all the information we had collected about the service including previous inspection reports and notifications the registered manager had sent us. A notification is information about important events which the service is required to tell us about by law. We used the information the provider sent us in the provider information return. This is information providers are required to send us with key information about their service, what they do well, and improvements they plan to make. This information helps support our inspections. We used all of this information to plan our inspection.

During the inspection

We spoke with four people who use the service and three relatives. In addition, we received feedback from six members of the staff team. We spoke with the registered manager, the regional director and reviewed a range of records. These included five people's care plans, associated monitoring records. We also looked at a variety of records relating to the management of the service, including quality assurance, incidents and accidents, supervision, spot checks and observations, complaints and compliments, policies and procedures.

After the inspection

We looked at further training data and quality assurance records, meeting minutes and recruitment information for four staff members sent to us after the inspection. We sought feedback from the local authority and professionals who work with the service and received three responses.

Is the service safe?

Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm. At the last inspection this key question was rated as good. At this inspection this key question has deteriorated 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.

Recruitment

- The registered manager did not use recruitment procedures in place effectively to ensure suitable staff were employed. Staff files included a health check and a Disclosure and Barring Service (DBS) check. A DBS confirms candidates do not have a criminal conviction that prevents them from working with vulnerable adults. Additionally, interviews were designed to establish if candidates had the appropriate attitude and values.
- The registered person had not carried out all the required checks on applicants before allowing them to support the people who use the service. Of the five recruitment files we assessed, four did not have all the required recruitment information. Missing information included some references from previous employment regarding staff's conduct and verifying reasons for leaving, some employment histories and on one occasion a risk assessment in relation to a staff member's criminal record. This placed people at risk of receiving care from unsuitable staff.

The provider had not followed their established recruitment procedures or obtained the information required by the regulations to ensure the suitability of all staff employed. This was a breach of Regulation 19 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

- Following our inspection the registered manager told us they had taken action to address these concerns.

Assessing risk, safety monitoring and management

- The registered manager and senior staff assessed the risks to people's personal safety. Risk management plans had guidance to ensure risk mitigation so that people continued to receive safe and effective support.
- We noted some risk management plans could have been more accurate to ensure staff had guidance to mitigate the risks. For example, one person had to have specific support with their diet. However, we noted to the registered manager a risk assessment has not been carried out to explore mitigation of risks. Another person had bed rails in place according to the record and they had capacity to decide whether to use them. When we asked the registered manager about it, they explained they were not using it, so they agreed the record needed rectifying.
- We discussed the risk assessments, prevention measures and support plans with the registered manager who agreed with our feedback regarding their files. They took immediate action to review and rearrange the information to ensure relevant and important guidance was easy to find so that people continued to receive safe and effective support. We received information after the inspection regarding improved support plans and guidance for staff.
- The service ensured people's rights and freedom were considered when managing risks. People and relatives said, "They do protect me from hurting myself when they are helping me, they are gentle and tell

me what they are doing. I discuss what I need, and we talk about changes I want. I get a choice", "They tell me what they need to do, and they ask me if I need any help with anything. I make decisions about how I like them to do things with me. I make all my decisions about what to do each day", "They help him manage well. He has a lot of freedom, they help him to make choices about all sorts of things, food, outings. He is leading his life" and "They discuss what she needs with me if I am there and I have had a call from the manager before when they felt she needed more help. I discussed this with them and her GP. I'm happy with that kind of recommendation because it came from her regular key worker."

- The service had business continuity plans to ensure the people could continue to receive support in the event of an emergency.
- As part of people's support plan, the service carried out a health and safety assessment of the environment to ensure the person, their family and staff were safe while carrying on the regulated activity.
- There was an on-call system in place for staff should they need help and advice and staff confirmed this.

Systems and processes to safeguard people from the risk of abuse

- People felt safe in their homes and liked the staff who supported them. Relatives agreed they felt their family members were safe with staff. They said, "I have no concerns, the regular carers we have are nice", "I don't think there would ever be a concern there. My carers are very good and professional" and "Safety is something we thought about when we started but I have to say we don't have any concerns with the carers she has, they are wonderful."
- The registered manager understood their responsibilities in regard to safeguarding people who use the service and reporting concerns to external professionals accordingly.
- Staff knew how to recognise abuse and protect people from the risk of abuse. They were able to explain what actions to take if they felt people were at risk including to contact the outside organisations.
- Staff told us they were confident the management team would act on any concerns reported to ensure people's safety.

Staffing

- The registered manager determined the number of care packages according to the needs of the people using the service and staff numbers. They allocated the same staff to the same people as much as possible to ensure there was a continuity in meeting people's needs. People and relatives added, "I think they are doing shifts and always come to me on time", "There is always someone when you need them and if my key worker is on a break someone else is there to ask" and "There has to be two with him and for over a year now, this has been consistent. We are very happy with this as I struggle to help, and he likes to know the people well. He trusts them and so do we."
- The registered manager and the office senior staff oversaw the weekly rota using an online system that helped identify visits that needed staff allocation. They also looked at staff capacity and how many care packages could be taken on. The staff had time to visit and support people and helped each other to cover absences.
- People and relatives were informed of late visits. People and relatives confirmed staff took time to support and care for them appropriately without rushing. They said, "They do. They ask me if I need them anymore and tell me where they are going like to the kitchen to prepare things. I know where I can find someone any time", "They stay their time. Shifts are long I think. Sometimes if he is feeling insecure they stay with him a bit longer. This has massively improved his trust in people since coming here", "They do and recently have helped me rearrange my room. They help me to do anything" and "Yes they do, I have no recollection of them leaving early."

Using medicines safely

- People had their medicines managed safely. People and relatives confirmed staff supported them with

taking medicines as necessary. They said, "I know what I am having and if I ask they explain and remind me what they are for", "I have medication in the morning and evening. I forget what it is for and my key worker tells me and writes it down in my folder", "I chatted with the managers about his medication and then the carer when she started. We all know. They tell him when they give it to him what it is for. It's all recorded" and "I like to check the care plan notes when I come in and then I see that she has had what she is meant to. They are always up to date."

- The registered manager explained they started using a monitoring system that helped them oversee medicine administration and records for it. They reviewed medicine administration record (MAR) sheets daily for any errors.
- There were five medication errors from July 2019 to September 2019. Appropriate actions were taken, and this was to follow up at next supervision to check if staff had read the medication policy.
- The training matrix record confirmed staff had received training in handling medicines and competency assessments. Staff's competency was also reviewed at spot checks to ensure they continued supporting people with medicines appropriately.

Preventing and controlling infection

- Staff were provided with and used personal protective equipment to prevent the spread of infection. People and relatives confirmed this and said staff wore the protective equipment while supporting them.
- Staff were trained in infection control and followed the provider's policies and procedures on this.

Learning lessons when things go wrong

- There was a system for recording accidents and incidents. The registered manager said if something happened it would be also on the agenda to discuss it within the team and think of ways to prevent it recurring. If needed, people and relatives were visited to discuss any issues or concerns further.
- The registered manager took on board the queries we raised during our inspection and addressed them promptly. They had also created an action plan following our inspection to ensure any changes or improvements needed, were actioned in a timely manner.

Is the service effective?

Our findings

Effective – this means we looked for evidence that people's care, treatment and support achieved good outcomes and promoted a good quality of life, based on best available evidence.

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant people's outcomes were consistently good, and people's feedback confirmed this.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law

- People's care needs were assessed to identify the support they required and to ensure that the service was meeting these individual needs. Support plans provided staff with detailed instructions on how personal care should be given to the individual so that it met their needs safely and effectively.
- Each support plan was based on a full assessment and it clearly described people's personal likes and preferences, their social interests, as well as physical and emotional needs. It demonstrated the person had been involved in drawing up their plan.
- Support plans also detailed the outcomes people wanted to achieve and how they wished to be supported. People's needs, and their support plans were reviewed regularly to ensure the service continued to meet the individual's need and that outcomes were being achieved. It was also to ensure people were able to live life to their full potential and as they chose.
- As part of the County Carers induction it was a mandatory requirement to become a recognised dementia friend. The Dementia Friends programme introduced by the Alzheimer's Society's is the biggest ever initiative to change people's perceptions of dementia. It aims to transform the way the nation thinks, acts and talks about the condition to promote positive outcomes for people. The registered manager shared an example where staff were able to support people to achieve positive outcomes for people. For example, one of the people using the service joined County Carers diagnosed with dementia and found daily tasks difficult, not wanting to look after himself or even to participate in any social activities. Regular staff over time gained a good understanding of person's dementia and were able to use skills and techniques learnt through being a dementia friend to identify ways to help encourage him to do daily tasks. Staff used a gentle approach to help the person look after himself such as have a cup of tea and then look at the log they wrote together at the end of the visit the day before. They would discuss how much of an enjoyable morning the person had, all the great things he achieved and that he felt he could achieve that same day. The support provided was successful and the person was doing really well, being able to go out for walks, coffee shop trips, walking round a garden centre and just really enjoying himself. The relatives added, "We have been very satisfied with the care for our [relative]. The carers are positive, fun, flexible and kind. We feel very lucky to have them around!" County Carers staff applied their learning effectively and in line with best practice. This led to good outcomes for people's care and support and promoted a good quality of life.

Staff support: induction, training, skills and experience

- People and relatives felt they received care from staff that had the necessary knowledge, skills and experience to perform their roles. They said, "They seem well trained and they enjoy what they are doing. They do not make me feel like I'm a problem. I had that in the last place", "They seem very well trained. I like them and especially my main one, she is good", "I feel looked after by nice people", "I feel the regular carers we get now know what they are doing and want to be doing the job. They support him but also support me

well. I have someone taking the pressure off and know that he is safe", "The staff are very good, efficient and knowledgeable. They work hard", "I think they are experienced in the care he needs, and they support him in the things he struggles with but giving him a lot of independence still."

- Staff received training that equipped them with the knowledge they needed to support people. The registered manager had a system for monitoring staff training to ensure training was up to date including regular spot checks to monitor staff member's practice and performance. When new staff started they had an induction that included training and a period of shadowing experienced staff before working on their own.
- Staff felt they received the training they needed to enable them to meet people's needs, choices and preferences. Staff felt supported by the registered manager. They used the provider's performance and appraisal system. Staff members received feedback about their performance and discussed training needs during one to one supervision.

Supporting people to eat and drink enough to maintain a balanced diet

- People were supported with their meals and drinks as part of their care package. Where someone needed help with eating or encouragement with drinking and having a balanced diet, guidance was provided to staff.
- People commented, "The carer helps me to make my dinner and he makes sure I have snacks and drinks that I can get on my own. We talk about them being healthy choices. He bought me a special cup to help keep my drinks warm when he isn't there" and "I choose what I have to eat, and I heat it up. If they have time they sit and chat with me while I eat dinner."
- Relatives added, "They make sure she drinks because she wouldn't for me before. They don't fuss and gently remind. They are good and very calm" and "I'm happy with this, they remind him to eat and keep an eye on his weight. He used to forget to eat. They called me when they decided with him that a healthier diet was needed, and I stopped bringing unhealthy snacks. He still has treats but not all the time and he said he feels better."
- Where people were not eating well staff would inform the person's relative, the registered manager or a senior member of staff and advice would be sought from a health professional if necessary.

Staff working with other agencies to provide consistent, effective, timely care; Supporting people to live healthier lives, access healthcare services and support

- People were supported to remain as healthy as possible. People's changing needs were monitored appropriately to ensure their health needs were responded to promptly.
- People and relatives added, "They look after me and help with the things I struggle with so yes I think I am being looked after properly", "My carers are brilliant. I forgot to look after myself before they came here", "It's basic assistance he needs but actually that is all he needs as long as they are reliable and good, and they are. We have a brilliant care package here" and "He gets exactly what he needs from them. I'm reassured."
- The service communicated with GPs, local authority, community nurses, occupational therapist, speech and language therapist and families for guidance and support. People were referred to various health professionals in good time to address any health or changing needs. The registered manager and the staff were knowledgeable and informed about people's health and wellbeing. Staff maintained a proactive approach and organised people's care and support well.
- Community professionals agreed the service provided effective care, from staff who had the knowledge and skills they needed to carry out their roles and responsibilities effectively.

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.

- People's rights to make their own decisions, where possible, were protected. Staff supported people to make decisions. People's rights were protected because the staff acted in accordance with the MCA.
- People confirmed staff asked them before providing any care or support. People and relatives felt the staff were polite and respectful towards people and respected their decisions. They said, "They ask me if I am happy with the care and how they are doing things. I got a call from the office manager to ask if everything is going well for me. That was a few weeks ago", "They ask me to let them know if I want to do things different and they ask if I would like to do certain things myself or in privacy like using the shower. Everything I say to change is recorded in my notes to remind me", "I get a say in what happens to me. I feel like they listen and give me some independence and choices to carry on doing things. There are no rules", "I tell them because he can't explain to them what he needs, and I feel that they listen to us too. We have good support and any changes are recorded", "They chat with me about how I feel she is and what she needs. They key workers she has always involve her which makes her feel like she is listened too. That is very important to her", "He is involved in decisions about what he wants to do and how they help him."
- People had specific information in their support plans regarding their decision making. It gave a description of how people were able to make their own choices and decisions and how staff should promote this.

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 the last inspection this key question was rated as good. At this inspection this key question has remained the same. 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

- People felt they were treated with compassion and kindness by the staff team and the registered manager. People and their relatives said, "I do feel they respect me and how I like things", "I feel the staff we have are very good and learned very quickly how much care he needs from them. They know to assist him at particular times as he gets upset if his routine is interrupted", "I think they are very good, I have no issues" and "I feel that they respect us as a family using their service. I feel he is looked after well, and the carer treats him as being important."
- The registered manager placed importance on ensuring people received continuous support from regular staff. People, relatives and staff knew each other well and had well established relationships.
- The registered manager and staff regularly checked during the visits whether people were happy with their support. Staff listened to any issues or questions and took action to address it.
- Staff delivered care and support that was caring and person-centred and which had a positive effect on people. People and relatives said, "They are kind and make me feel like a person", "They are very pleasant, and I do look forward to a chat", "I find the regular care I have is really good. They have time to listen to me", "The regular ones we are very fond of as they show they care by the time they give to us", "They are very patient, I find this really caring as she can be difficult with them".
- Staff understood the importance of treating people respectfully. They spoke about people with respect and they told us they enjoyed their roles. One member of staff told us, "We support our clients to live life as best as possible, and we support with choices and decisions. It is important to us all and our clients, it makes all the difference." Other staff added, "We want to help people to make that time as nice as possible. This is our priority – to show compassion and to make them feel comfortable" and "We treat all clients and staff with courtesy and politeness. We encourage people to express ideas and opinions. We listen and view everyone as an equal."
- The service ensured people's diverse needs and wishes were acknowledged and respected. People said, "I think they respect my wishes not to go to hospital because it makes me feel stressed unless I really am poorly. I feel listened to and they write it all down in my notes", "The carers we have listen to how I like things done and ask me if it is okay so I feel like we work together" and "My wishes are met. Sometimes I don't want help and want privacy, and this always is listened to." One staff member said, "Making sure that you listen to the individual needs, being kind and caring and following your passion with the care industry makes you do all of these [things]. Giving everyone a choice and making sure you take into consideration the needs and wants."

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

- People and those important to them were encouraged and involved in making sure they received the care

and support they wanted. People and relatives said, "My needs are met, and they ask me what I feel I need. They write messages for me to give to my family who check in on me, so I remember what I need to tell them", "My needs are being met and I am happy with this", "I am cared for well and do not have any complaints. I feel they keep up to date with what I need by chatting with me and writing it down", "His needs are met well. I feel I am involved in the planning of his care needs", "They have involved me. I had a lengthy call at the beginning with the office and answered lots of questions about the care he needs. This has been updated as carers found he needs some different assistance too and I have been kept informed with a few calls to discuss. I'm happy with this and so is he."

- People's records included detailed information about their personal circumstances and how they wished to be supported. Staff used this information to learn about people and engage with them in decisions about their care and support.

- People and relatives were able to express their views and opinions. They said, "I feel they listen to me and give me time to answer any questions", "I think they listen to my wishes. I have certain ways I like things in my personal space and they listen and now I don't need to remind them not to move things. The care I get is on my terms and I feel safe", "I tell them what I think. Sometimes I think they think I am wrong, but they still agree with me unless it is something that is going to hurt me or cause harm like I told him to just pull me up and he said he couldn't because it would hurt me, and he would also hurt his own back. He was very nice. They explain things well and why they do things", "They ask me what I think of how they do things and I feel they take on board what I say and how I feel" and "I feel they listen to how I know he likes things. He can be forgetful, and I leave sticky notes to remind him where things are. They said they would do this too. I like that we all do the things the same way."

- The registered manager passed compliments to the staff to let them know their work was appreciated. We saw numerous compliments from people and their relatives.

-For example, "Care staff have particularly lovely manner with mum and dad – always spending time and talking and listening to them always giving them space to talk over their life experiences etc [staff's] sunny positive can-do disposition makes it a pleasure for [staff] to be around."

-"County carers have been a lifeline to me over the last eighteen months as I have the peace of mind knowing that my mum is being looked after by lovely ladies who genuinely care, and the management team have also been very accommodating and helpful every step along the way. Highly recommend."

-"County carers are a wonderful organisation who looked after my friend in the late stages of her life at home to perfection. The carer they provided was so professional warm hearted and understood my friend's needs extremely well. I cannot recommend them highly enough. The organisation was very good at listening to what my friend needed and communicating well with me. Thank you so much."

-"Keeps [relative] and the house spotless, keeps [relative] company and entertained. I find [staff] trustworthy and honest and dedicated in doing her job well. I also like [staff member], [staff member] is chatty and has a giggle with us and [relative]. We have not had emergency with [staff] in charge or been on holiday when she is with [relative], but we are confident she would deal with any situation".

Respecting and promoting people's privacy, dignity and independence

- People agreed staff respected their dignity and privacy and made them feel comfortable at all times. They said, "I feel I still have my dignity and I'm listened to", "Privacy is as good as it can be, and they do ask first if they can assist with personal things or to come in. I feel I have dignity", "Yes and they respect us as a family", "They give her personal care assistance in her bedroom and ask if they can", "It is a very dignified service."

- Staff ensured people were fully involved with their care, promoting independence whenever possible. They understood people's independence was an important aspect of their lives. People and relatives felt the staff helped people maintain their independence by supporting them with daily tasks as necessary. They said, "I do have a plan, so I know exactly what they should be doing and how they will help me do it to keep me safe", "Yes I have all that and can make suggestions if I think it would be easier or if there is a certain way he

likes things. This has been consistent from the start. It's a good thing" and "They discussed this with me and her and we all know the best way to do things."

- Any private and confidential information relating to the care and treatment of people was kept in their home in their chosen place. This information was also kept securely in the office.

Is the service responsive?

Our findings

Responsive – this means we looked for evidence that the service met people's needs.

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant people's needs were met through good organisation and delivery.

Planning personalised care to meet people's needs, preferences, interests and give them choice and control

- People received the individualised care and support they needed which supported their cultural identities and preferences at the time specified in the support plan. People continued to have their needs assessed after they started using the service. They said, "I don't have to keep reminding them because it is written in my plan. They make sure they know of changes I need like more help to do care things", "Yes I get what I need and how I like it", "They make me feel like a person that is listened to and I feel I still am quite independent because they give me the help with the things I find hard." Relatives said, "He gets all the help he needs from them and they do assist him well. It's very centred on him and we are very happy with that" and "Yes they are good at focusing on her and her needs are met well."

- People and their relatives were involved in the care planning process. The service was flexible and adjusted to people's needs when necessary. Information had been sought from the person, their relatives and other professionals involved in their care. This information was then used to compile the plan of care and support plan which included practical information on maintaining the person's health and wellbeing, emotional support, and their daily routines. Staff recorded care and support provided at each visit.

- The information recorded helped staff monitor their health and welfare, responding to any changes and enabling them to make timely referrals to appropriate professionals. People and relatives said, "The carers review any changes with me by chatting and answering questions I have. The office call now and again and ask how I am finding my care", "I've had chats with the staff about if I am getting what I need which I am", "The carer chats with me to see if I think I'm getting what I need and if I'm happy" and "I have been called by the office a few times on updates and how I think they are doing." Staff provided support that met the needs of the people. Staff knew people's likes and dislikes and used this knowledge to care for people in the way they wanted.

Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities that are socially and culturally relevant to them

- The provider has been holding a Christmas Day celebration for people, their relatives and staff every year in December. They are sent via post a personalised invitation at the beginning of November. The management team then liaised with people, relatives and staff about safest methods of transport to ensure everyone had the opportunity to get to the celebration and enjoy the afternoon together.

- The provider would take extra effort to ensure everybody could attend. In 2018 they arranged a local day centre to support them with a person to enable them to attend. Due to various health conditions they were not able to attend the party the year before. Therefore, last year the staff made sure a plan of action was implemented and followed by the person's daily staff to ensure the person was managing their health and building up the confidence to attend the event. With careful planning and excellent support of the management team and daily staff, the person was able to attend and enjoy the party. People, relatives and staff had a lovely afternoon, had some festive treats and meeting other members of the team they may not

have met yet due to seeing the same regular staff on their daily visits. People and their relatives felt they were part of the whole team and that they mattered to the provider.

- The live-in carers also make the occasion special by attending with people they support. One of the people was supported to make some special Christmas cakes for the day. The person had always enjoyed baking but due to health changes, found it difficult to do any baking without the support of the staff. However, the person was so pleased she had something to look forward to and thoroughly enjoyed baking for everyone. Her relative added, "[Relative's] carer is doing a fantastic job with her; she is very competent in all aspects of care, very friendly, enthusiastic and friendly. She has really encouraged [relative] to be proactive both physically and socially with the support of County Carers. This has not only helped improve her mobility considerably in recent months but has also produced great improvements in her mental state... Therefore, I'm very pleased with her work and would highly recommend County Carers to others."

- Following quality assurance surveys in May 2019, liaising with people who use the service, their families and the staff team, the registered manager identified client excellence as an area to concentrate on. The registered manager worked with professional bodies, the staff team, and people to ensure the correct level of care was met at all times whilst encouraging people to be the best they could be to maintain their independence.

- The provider decided to create very own wish list for the people. The wish list was introduced in people's reviews as it was a time to discuss their current needs and any changes they wanted to make. So, this exercise was quite beneficial for the people. Although County Carers Limited is not responsible for providing and arranging activities for people. However, the registered manager explained County Carers worked extremely hard to ensure staff went 'above and beyond' to meet the needs of people they supported, through focusing on upcoming events, milestones and occasions. This also helped stimulate people, encouraged them to focus on their needs, maintain their daily exercises and look after themselves so they could focus on the positive things to help them reach their end goal identified in their wish lists.

- For example, one person recently had a short visit to the hospital, and after their return, they felt a little deflated and had lost some confidence. Following a discussion with person's regular staff, the provider felt this was the perfect opportunity to focus on the person's wish list. The person had set a four-week timeframe to be back to their confident self and wanted to visit one of famous places in London as it was a place she used to enjoy visiting. The person felt it was a little optimistic due to the need of using a wheelchair and the different types of transport needed. But with staff's support, the person was determined to get herself steady for the occasion. The trip was planned, assessments made, and all parties were happy for the trip to go ahead. The staff accompanying the person said, "From the moment we got on our first bus to the moment we got on the train home she didn't stop smiling. Her family are so pleased she did it and it's really given her the boost she needed and that she's still very independent - I'm just here for her safety and support." The relatives also agreed the patience, support and efforts of the staff really helped the person to improve their wellbeing and health.

Meeting people's communication needs

Since 2016 onwards all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard (AIS). The standard was introduced to make sure people are given information in a way they can understand. The standard applies to all people with a disability, impairment or sensory loss and in some circumstances to their carers.

- The service identified people's information and communication needs by assessing and recording them in their care plans.

- There was some guidance in communicating with people in a manner they could understand. We discussed the five steps of AIS with the registered manager to ensure all information presented was highlighted and in a format people would be able to understand.

Improving care quality in response to complaints or concerns

- People and relatives felt confident their complaints would be taken seriously and responded to in a timely manner. "I know how to complain to the management, but I haven't had to. Whenever I've needed them they've have helped me straight away" and "The manager comes back to you if you leave a message and I've found if I say I need to know something quickly for example you get a visit or call back within half a morning usually."
- The registered manager looked at complaints made by people or their relatives promptly and carefully. The service monitored, reviewed and analysed all information received about the service as a means of continuously reviewing performance, quality and safety. The service shared themes and trends with the staff team.
- People and their relatives felt they could approach the registered manager or one of the staff, if they had any issues. They said, "I would tell the carer and they chat with me. They listen. If I couldn't do that I would call the office and ask them to help. I called the office once because I wanted them to find out about some bank stuff for me and they called me back straight away", "They answer the phone immediately and if you called to ask questions or a query to the office it is replied to quickly too. The service responds well", "I would call the office, but I haven't had to. They seem efficient", "I would call to discuss with the manager. I find them easy to talk to although I've never had a complaint."
- The staff felt they could approach the registered manager or one of the senior staff with any concerns about people or their care should they needed to, and it would be addressed promptly.

End of life care and support

- At the time of our inspection there was no one receiving end of life care. However, the registered manager said if a person was in need of end of life care, staff would complete specific end of life care plan with the person and important people to them that would include any wishes, preferences and religious needs.

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 the last inspection this key question was rated as good. At this inspection this key question has deteriorated to requires improvement. This meant the service management and leadership was inconsistent. Leaders and the culture they created did not always support the delivery of high-quality, person-centred care.

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 provider understood their responsibilities in relation to the duty of candour, to be open and honest with people. However, they had not recorded and kept the necessary records to demonstrate that they had taken appropriate action. Since the last inspection, we had received notifications regarding four serious injuries, which had resulted from people falling, whilst live in carers were providing support. The provider had identified these as notifiable incidents. There were no records in relation to these incidents to demonstrate how the provider had met their duty of candour responsibilities.

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

- The registered manager had a quality assurance system in place that included different audits, so they could assess and monitor the service delivered. However, the registered manager did not always use their quality assurance systems effectively to promptly identify areas for improvement. For example, audits had not identified the concerns around staff recruitment. Where we found inaccuracies with information about the accuracy or detail contained within people's care plans, these had not been picked up through the quality reviews of care plans. The registered manager did not ensure Duty of candour records were kept in line with the regulation.

The registered person had not operated an effective system consistently to enable them to assess, monitor and improve the quality and safety of the service provided. The registered person had not established or used an effective system to enable them to ensure compliance with their legal obligations and the regulations. This was a breach of Regulation 17 (Good governance) of The Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

- We did not receive any negative feedback about the service from people and their relatives. The registered manager provided their action plan after the inspection indicating areas to improve and ensure they had an accurate overview of the quality of the service.

- The registered manager and senior staff continued to carry out visits to people, review their care and seek feedback from people and their relatives to help them monitor the quality of service. Senior staff and the registered manager also carried out spot checks and field observations monitoring the performance and competency of care staff. These checks involved getting feedback from the people who use the service. It also included checking the timing of visits, attitude of staff and whether the staff were wearing their

uniforms and identification badges. Any issues or gaps picked up were addressed with the staff.

- The registered manager held weekly management meetings to review any actions to complete or issues to resolve. They were also working according to an improvement plan to ensure necessary improvements were made.
- There was an online system to schedule and monitor visits. If any care or visits were late or missed, the person receiving the visit would have to notify the office this was the case. The registered manager said there were no missed visits and rarely any late calls. They also identified they needed to consider all people who would not be able to notify the office if staff had not attended their visit. For those who would be unable to notify the office, they completed a risk assessment, an action plan and incorporate into initial assessment and monthly review.
- The service had a manager registered with the Care Quality Commission. This means that they and the provider are legally responsible for how the service is run and for the safety and quality of care provided.
- The registered manager submitted notifications to us when required. Notifications are the events that the registered person is required by law to inform us of.

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

- The registered manager and staff shared a responsibility for promoting and supporting people's wellbeing, independence and safety. There was a 'whole team approach' and supportive culture within the team. People and relatives said, "It is not bad at all, I like the carers and they are very kind", "It is better than some I've had", "My care is the best ever", "Things are very good if it continues it will be great. The quality of the care is much better than we've had from other places and the office seem efficient. They seem to work as a proactive team" and "I find them good at what they do to help us all and he is happy and that's the main thing."
- Staff felt they could approach the management team with any concerns. Staff were positive about the support from the registered manager and staff team. They said, "I really enjoy it. all you have to do is ask for support and [the registered manager] always comes up with training. I feel comfortable her", "I have to say I am very happy with County Carers. I feel supported and I can rely on staff team" and "County Carers pride themselves with continuity of care and that's what the clients receive and love. I have worked for this company for less than 2 years and I couldn't think of a better company to work for."
- The registered manager praised the staff team saying, "The team is really good, and we have some amazing carers here and I will do my best to help staff. They show care to people above and beyond, and they are really excellent." The registered manager added she felt supported by their seniors within the organisation.

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

- The registered manager carried out surveys to seek feedback including conducting quality assurance surveys to gain the views of people and relatives. Where people or relatives raised any issues or made comments about the service received, the registered manager had addressed it promptly. People and relatives added, "Feedback is welcome, and my carers listen. I had a call about a month ago from the office to ask what I thought, and they were on the phone for about 15 minutes listening", "I have had a questionnaire on the phone to see if I'm happy with the service recently", "They asked me if I was happy with my care and if I needed anything else. They listened to all my advice and I feel listened to" and "They came to me for a 'touch base' chat and they answered my questions."
- The registered manager held staff team meetings to ensure all staff team members were aware of any issues, any changes in people's needs or care, actions to take and pass on positive feedback.
- The registered manager also introduced a newsletter that was for the benefit of the people who use the

service, their families and the staff. This was done to improve the service the provider delivered to people and support the team. The newsletter captured information such as team updates, anniversaries, birthdays, new updates and upcoming events and details of carers of the month. Everyone found the newsletter informative, professional and interesting to read. The feedback was, "Very informative and interesting to read, good to see changes/comings and goings of County Carers staff, like the personalised feel of the newsletter since it highlights clients and special events important to them (especially liked the features about my parents this month, highlights good practice in care with Carers of the Month". One staff said, "Your newsletter looks great, very professional and informative". The regional director said, "The impact is everybody has an insight of information about the service and clients looking forward to this every month. A little bit of recognition for the clients. This is being transparent and communication. This is sent to everyone, living ins, dailies, healthcare professionals, staff and relatives."

Working in partnership with others

- The registered manager had established partnership working with outside organisations and in the service. Where necessary, external health and social care professionals had been consulted or kept up to date with developments.
- The provider also supported two local authorities at their community dementia meetings as all of the staff team are dementia friends. The provider is currently in the process of joining local Dementia Action Alliance group. They have also registered to work with dementia research. The provider also raised a considerable amount of money in May 2019 for Dementia and Alzheimer's society with their local sponsored walk.
- The service had good links with the local community and the provider worked in partnership to improve people's wellbeing. The service had positive relationships and regular contact with professionals including GPs, occupational therapists, social services, a speech and language team, nutritionist, mental health team and the local authority.

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	<p>Regulation 17 HSCA RA Regulations 2014 Good governance</p> <p>How the regulation was not met:</p> <p>The registered person had not operated an effective system consistently to enable them to assess, monitor and improve the quality and safety of the service provided. The registered person had not established or used an effective system to enable them to ensure compliance with their legal obligations and the regulations. This was a breach of Regulation 17 (Good governance) of The Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.</p>
Regulated activity	Regulation
Personal care	<p>Regulation 19 HSCA RA Regulations 2014 Fit and proper persons employed</p> <p>How the regulation was not met:</p> <p>The registered person did not operate effective recruitment procedures to ensure people were safe from risks of being cared for by inappropriate and unfit staff. Not all information specified in Schedule 3 was available. Regulation 19 (1) (2) (3)</p>