

County Carers Limited

# County Carers Limited

## Inspection report

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## Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service well-led?

Good ●

# Summary of findings

## Overall summary

### About the service

County Carers Limited is a domiciliary care agency providing personal care to people in their own homes. The service supports older people, people living with dementia and people with a physical disability. At the time of our inspection the service was providing personal care to 54 people.

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.

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

Staff understood their responsibilities to protect people from harm and knew how to raise safeguarding concerns. People's care plans contained detailed risk assessments with specific instructions for staff about how to safeguard people from identified risks.

The registered manager had completed the necessary safe recruitment checks to ensure they employed suitable staff.

There were enough staff to meet people's needs and provide safe care. People were supported to take their medicines by suitably trained staff. People were protected from the risk of getting an infection by trained staff.

The registered manager and senior staff team were committed to providing individualised, safe care. They maintained a detailed oversight of quality and safety in the service through completing a series of effective checks and audits.

People felt staff and the management team were competent and approachable. They told us they felt comfortable raising any queries or concerns.

Staff reviewed their practice to make improvements and worked effectively with health and social care professionals.

For more details, please see the full report which is on the CQC website at [www.cqc.org.uk](http://www.cqc.org.uk)

### Rating at last inspection (and update)

The last rating for this service was requires improvement (published 08 November 2019) and there were two breaches of regulation. At this inspection we found improvements had been made and the provider was no longer in breach of regulations.

### Why we inspected

We carried out an announced, comprehensive inspection of this service on 08 November 2019. Breaches of legal requirements were found. The provider completed an action plan after the last inspection to show what they would do and by when to improve to comply with the regulations 'good governance', and 'fit and proper persons employed'.

We undertook this focused inspection to check they had followed their action plan and to confirm they now met legal requirements. This report only covers our findings in relation to the Key Questions safe and well-led which contain those requirements.

The ratings from the previous comprehensive inspection for those key questions not looked at on this occasion were used in calculating the overall rating at this inspection. The overall rating for the service has changed from requires improvement to good. This is based on the findings at this inspection.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for County Carers Limited on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

#### Follow up

We will continue to monitor information we receive about the service 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?

Good ●

The service was safe

Details are in our safe findings below

### Is the service well-led?

Good ●

The service was well-led

Details are in our well-led findings below

# 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 an Expert by Experience. 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 homes.

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 a short period notice of the inspection because 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 reviewed information we had received about the service since the last inspection. We sought feedback from the local authority and professionals who work with the service.

The provider was not asked to complete a provider information return prior to this inspection. This is information we require providers to send us to give some key information about the service, what the service does well and improvements they plan to make. We took this into account when we inspected the service

and made the judgements in this report.

#### During the inspection

We spoke with nine people who used the service and two relatives about their experience of the care provided. We sought feedback from five professionals and received feedback from two professionals. We received feedback from 17 members of staff. We also spoke with the registered manager.

We reviewed a range of records. This included four people's care records. We looked at six staff recruitment files. We also looked at a variety of records relating to the management of the service, including audits, care plan review documents, staff meeting minutes and the registered manager's weekly handover records.

#### After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at medicines administration records (MARs) for three people who used the service.

# 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 requires improvement. At this inspection this key question has now improved to good.

Good: This meant people were safe and protected from avoidable harm.

### Staffing and recruitment

At our last inspection 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.

Enough improvement had been made and the provider was no longer in breach of regulation 19.

- The registered manager carried out all the required checks before employing staff. This included seeking evidence of conduct and completing a Disclosure and Barring Service (DBS) check. A DBS check confirms candidates do not have a criminal conviction that prevents them from working with vulnerable adults.
- For staff who had received convictions for minor offences in the past, the registered manager completed thorough risk assessments to ensure staff were suitable to support people.
- The registered manager conducted detailed interviews with staff to assess their suitability for the role and obtained complete work and education histories for staff. Any gaps in education or employment were explained in staff's recruitment files.
- The registered manager ensured there were always enough staff to provide consistency of care and meet people's needs. They used an electronic system to allocate staff to care visits. They had detailed plans in place to cover staff absences to ensure people received support. In exceptional circumstances such as carers not being available, the registered manager and senior team were all trained to deliver care themselves.
- Staff reported they had enough time to complete all tasks and deliver personalised support at each visit.

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

- People told us they felt safe with staff. One person said, "Oh they are absolutely marvellous". Another person told us, "I have nothing but praise for them."
- Staff were trained in safeguarding and felt confident to report any concerns to ensure people's safety and wellbeing.
- The registered manager understood their duty to report safeguarding concerns to the local authority. Any safeguarding issues were reported promptly.

### Assessing risk, safety monitoring and management

- People's care plans contained detailed, individualised risk assessments with clear instructions for staff on

how to protect people from risks. One person's risk assessment stated they were at increased risk of catching Covid-19 due to their health. The risk assessment contained clear guidance for staff to protect the person from this risk.

- Care plans contained environmental risk assessments to help staff protect people from hazards in their environments. These were comprehensive, with clear instructions for staff.
- The registered manager's audits showed risk assessments were reviewed and updated regularly.

#### Using medicines safely

- People were supported to take their medicines by suitably qualified staff.
- There were robust systems in place for managing people's medicines. Medicines administration records (MARs) were clear and legible and had been completed accurately.
- The registered manager completed regular audits on MARs and competency checks on staff to ensure safe practice with medicines.
- The staff training matrix showed all staff had completed training in medicines administration and refresher training had been booked.

#### Preventing and controlling infection

- People told us staff were skilled in infection control and knew how to prevent people catching infections such as Covid-19. One person said, "Staff wear masks when they are washing and dressing me. I know that they are also very careful when they are out and about."
- The registered manager ensured all staff used the correct personal protective equipment (PPE) when delivering care. Staff completed weekly testing for Covid-19 and there was a clear policy in place for staff regarding providing care during the pandemic.
- When one person showed signs of being infected with Covid-19, the registered manager ensured they were only cared for by the same two staff members until their isolation period finished to keep them safe and prevent spreading infection to anyone else.

#### Learning lessons when things go wrong

- The registered manager maintained an up to date record of accidents and incidents. This showed staff took appropriate actions to safeguard people following accidents or incidents and to prevent recurrences.
- Staff reflected on practice through weekly handovers and team meetings. The registered manager encouraged an open culture in the service to help staff identify improvements following incidents.



# 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 requires improvement. At this inspection this key question has now improved to good.

Good: This meant the service was consistently managed and well-led. Leaders and the culture they created promoted 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; managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements

At the last inspection the registered manager had not kept the necessary records to demonstrate how they had met their duty of candour responsibilities with regard to serious injuries sustained whilst people were receiving support.

The registered manager's 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 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 manager 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.

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

- The registered manager demonstrated they understood and acted upon the duty of candour.
- When incidents occurred, the registered manager followed a strict process to ensure a detailed investigation was completed. This included taking statements from all staff involved, environmental and person-specific risk assessments and letters of apology to those involved in the incident or their nominated representatives.
- The registered manager's accident and incident record documented all actions taken following incidents, including sending notifications to the Care Quality Commission where appropriate.
- The registered manager maintained a detailed oversight of the service through a system of reviews and audits to ensure quality and safety in the service were maintained.
- Audits showed outstanding actions were completed within agreed timescales. For example, a review of a risk assessment identified showed some additional information needed to be included. This had been

completed by the following day.

- Weekly handovers were held by the senior team to prioritise actions each week such as completing audits, care plan assessments and care plan reviews. The registered manager delegated responsibility for completing some audits to managers. They also completed annual audits on all aspects of the service.
- The registered manager's emergency plan for Covid-19 provided detailed actions for the service to support people during the pandemic. It identified support needs for all people using the service and highlighted the support needed by the most vulnerable people. It also included information about how the service could provide support to other services in the area, and work with external professionals to meet people's needs during the pandemic. Actions for staff were clear and detailed including which staff took responsibility for which actions.

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

- People told us they were very happy with the service provided and that any changes were communicated effectively by the staff team.
- The registered manager and senior team were committed to providing individualised care which met people's needs and enhanced their wellbeing. They encouraged an open, reflective culture in the service
- Staff felt the management team were supportive and approachable. One staff member fed back that they were pleased with how quickly the management team responded when they raised an issue. Another staff member told us "I have been with County Carers for three years now and I've never been happier in my job role. My line managers and co workers are all very supportive. We are very well managed."

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

- People were encouraged to give feedback about the service. The registered manager sent out regular quality assurance surveys. People had made many positive comments about the caring and friendly approach of staff.
- The registered manager issued a monthly newsletter for people and staff. This included updates about the service, safety information and photos of people spending time with their carers during outings and celebrations.
- During lockdown, despite people not being able to take part in their regular activities, staff had included many positive articles about people and their carers, including birthday celebrations and Christmas dinners.
- Staff were also engaged in the service and encouraged to give their feedback. They completed regular surveys and attended staff meetings. Meeting minutes showed staff opinions were regularly sought. Actions from meetings were identified and completed to help drive service improvements.
- Staff told us they felt confident reporting any concerns or poor practice to the management team.

Working in partnership with others

- The registered manager worked effectively in partnership with professionals from health and social care.
- We received positive feedback from a professional who worked with the service. They said, "They are very good at recognising if other agencies need to be involved and contacting when needed."
- Staff referred people to health and social care professionals to access services to promote their health and wellbeing.