

Kensey Care

Kensey Care Services

Inspection report

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26 April 2021

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Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service effective?

Good ●

Is the service caring?

Good ●

Is the service responsive?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

About the service

Kensley Care Services is a domiciliary care agency providing personal care to 39 people aged 65 and over at the time of the inspection.

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 using this service and what we found

People told us they felt safe whilst receiving support from the service. Staff understood their responsibilities to keep people safe and report any concerns. The provider had ensured there were sufficient records and checks in place to maintain and promote people's safety.

People were supported by staff who had received training to carry out their roles. Staff confirmed they felt confident in their work and could easily ask for more training. Records showed people's needs were assessed and recorded and external advice was regularly sought to help ensure the support people received met best practice.

People told us they received the right support with food and drink, medicines and any healthcare needs. Records showed that any problems were highlighted and dealt with promptly.

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 told us they were treated with kindness and respect. Staff spoke about people in a caring way and placed value on the relationships they had with people and the positive impact they had on people's lives.

Staff were able to describe for each person the best way to communicate and understand people, which helped ensure people's views were heard.

People told us the care they received was how they wanted it and based on their choices and preferences. People confirmed they were involved in the content of their care plans; these helped ensure staff provided consistent care based on people's wishes.

People understood how to raise concerns or complaints about the service. Records showed action to resolve these was taken promptly.

There was a positive culture within the service and staff team. The registered manager told us staff were

encouraged to suggest ideas regarding how people's support could be improved and this had led to improved outcomes for people.

The registered and deputy managers carried out quality assurance checks on all aspects of the service. Any required changes were shared with staff and action taken to improve the service. People told us their views of the service were sought and that they thought the service was well led.

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

Rating at last inspection This service was registered with us on 2 July 2019 and this is the first inspection.

Why we inspected

This was a planned inspection to provide a rating for the service.

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 safe.
Details are in our safe findings below.

Good ●

Is the service effective?

The service was effective.
Details are in our safe findings below.

Good ●

Is the service caring?

The service was caring.
Details are in our safe findings below.

Good ●

Is the service responsive?

The service was responsive.
Details are in our safe findings below.

Good ●

Is the service well-led?

The service was well led.
Details are in our safe findings below.

Good ●

Kensey Care Services

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

One inspector and two assistant inspectors.

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. The registered manager was also the provider and was supported in the day to day running of the service by the deputy manager.

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.

Inspection activity started on 21 April 2021 and ended on 30 April 2021. We visited the office location on 23 April 2021.

What we did before the inspection

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.

We reviewed information we had received about the service since it's registration. We sought feedback from professionals who work with the service. We received a response from one healthcare professional. We used all of this information to plan our inspection.

During the inspection

We spoke with seven people who used the service and two relatives about their experience of the care provided. We also received written feedback about the service from one person and two relatives. We spoke with six members of staff including the registered manager and deputy manager.

We reviewed a range of records. This included three people's care records and medication records. We looked at two staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including policies and procedures and audits were reviewed.

Is the service safe?

Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm.

This is the first inspection for this newly registered service. This key question has been rated Good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People were protected by staff who had an awareness and understanding of signs of possible abuse.
- People's records showed staff raised concerns where they felt people could be at risk of abuse, and appropriate action was taken.
- Part of the provider's stated philosophy was the importance of making people feel safe. People told us they felt safe when being supported by staff.

Assessing risk, safety monitoring and management

- People were supported by staff who understood and managed risk effectively. Any concerns were reported to the office and dealt with promptly.
- Risk assessments were in place to support people to be as independent as possible and contained guidance to help staff promote people's safety.
- People's records provided details of their preferences for staff entering and leaving people's homes.
- People were supported by suitable staff. Robust recruitment practices were in place to help ensure the right staff were employed to keep people safe. Staff confirmed these checks had been applied for and obtained prior to commencing their employment with the service.
- People confirmed the correct number of staff always attended calls and for the allocated time and that they did not feel rushed. A relative told us, "The staff who attend are all very polite and conscientious and seem to put in a lot of work in the two hour time slot that they are here."
- The registered and deputy managers told us they carefully, managed the balance between the number of people the service supported, and the number of staff employed so staff did not become over stretched.
- People were told in advance which staff would be carrying out each call. If this changed, or if staff were going to be late, people were informed. They confirmed this did not happen often.
- The computer system used by the service alerted staff in the office if no staff had attended someone's allocated call. This helped ensure any missed calls were quickly identified.

Using medicines safely

- People's care plans described in detail the medicines they had prescribed, and the level of assistance required from staff.
- People confirmed and records showed, people were given the medication they required at the correct times.
- Staff received training and assessments of their competency before they were able to administer people's medicines.

Preventing and controlling infection

- People were protected from the spread of infection by staff who had received infection control and food hygiene training.
- The registered manager had changed procedures and systems to reflect government guidance throughout the COVID 19 pandemic. Staff told us any changes were communicated to them promptly.
- People told us staff used PPE (personal protective equipment), such as masks, gloves and aprons correctly and disposed of them safely.

Learning lessons when things go wrong

- The registered and deputy manager collected a variety of information about the service that enabled them to identify any lessons that could be learned to improve the service.

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.

This is the first inspection for this newly registered service. This key question has been rated Good. 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

- Staff and management recorded comprehensive information about people, their needs and abilities and the support they required. One person explained, "They are helping me and doing exactly what I want and keeping me going."
- Staff were able to describe people's needs, as well as what was important to each person.
- Advice from professionals was regularly sought to help ensure staff were delivering care in line with best practice.

Staff support: induction, training, skills and experience

- People told us they thought staff had the right skills to meet their needs.
- Staff confirmed they had sufficient training and could also ask for further training opportunities.
- Some training and development was included in team meetings which gave staff the opportunity to reflect on their practice and ways they could improve.
- The registered manager had identified which training staff needed to complete before supporting people; and further training they expected staff to complete to increase their skills and knowledge. They monitored staff training to ensure it all remained up to date.

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

- If people needed support to prepare food, eat or drink, this information was clearly described in their care records.
- Staff told us that if they had concerns about how much people were eating or drinking, they would report this to senior staff and discuss strategies to encourage the person. If necessary, they also shared the information with relevant professionals for further support.

Staff working with other agencies to provide consistent, effective, timely care

- People's records showed staff regularly interacted with other agencies on people's behalf to help ensure they were receiving the right care and support.
- A social care professional confirmed that communication with the service was good. They added that they could access people's records on the provider's electronic system and this helped them gain a good understanding of people's needs.

Supporting people to live healthier lives, access healthcare services and support

- People's health was monitored and where people wanted support, staff contacted healthcare

professionals on their behalf.

- Where required, people's records included information about how staff should support them with their oral care. Staff also received training on oral care.

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.

- The registered manager and staff had a good understanding of the MCA and had recorded people's capacity to consent to the care provided.
- Staff understood that some people's capacity fluctuated and that they needed to regularly assess their ability to make decisions.
- People and staff confirmed staff sought consent before providing any care or support.

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.

This is the first inspection for this newly registered service. This key question has been rated Good. This meant people were supported and treated with dignity and respect; and involved as partners in their care.

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

- People told us staff treated them with care and had built positive relationships with them. One person told us, "They're marvellous, I love it! They make me laugh. They make it fun."
- The way staff spoke about people showed they genuinely cared for the people they supported. They spoke about people's wellbeing and were focused on providing the right support to improve people's lives. One person told us, "I actually look forward to them coming."
- People told us staff were respectful of their home and belongings.
- Staff knew, understood and responded to each person's diverse cultural, gender and spiritual needs in a caring and compassionate way.

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

- People told us they were involved in planning how their care was delivered. One person confirmed, "I have had a phone call asking if I am happy and if my preferences have changed at all."
- Records showed that people were listened to and any changes required to improve their care were made promptly. A relative confirmed, "What is good with this service are the apps they use and all the carers have all the information at hand."
- Staff described people's communication needs and what support individuals required to understand and communicate effectively.

Respecting and promoting people's privacy, dignity and independence

- People told us staff respected their privacy and dignity, and staff described different ways they did this for people.
- The provider's guide for the service stated, "We do not want to focus on what can't be done but rather on what can be done and what we can assist with." Staff confirmed they focused on recognising and maintaining people's abilities and independence. Comments included, "We never assume people can't do things, we always encourage them to do as much as they can. We don't take over. We encourage people gently so they can increase their skills and having more control improves their mental health."

Is the service responsive?

Our findings

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

This is the first inspection for this newly registered service. This key question has been rated Good. This meant people's needs were met through good organisation and delivery.

Planning personalised care to ensure people have choice and control and to meet their needs and preferences

- People were involved in planning their own care and making decisions about how their needs were met. One person told us, "They're very good. If I say, 'can you do something?' It's all done."
- People's care plans were updated with any changes as they happened. This helped ensure people received consistent support from staff. A relative confirmed, "We all talk about it and discuss what's necessary. It alters as time goes on."
- Staff told us the importance of sharing any new information about people with the office so it could be shared with all staff. A staff member confirmed, "It's very person-centred and people are not 'done to'."
- Where possible, the service was flexible about people's call times and the support they required. This helped ensure people remained in control of their care. A relative told us, "We have altered call times a couple of times. They're very helpful."

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.

- People's communication needs were identified, recorded and highlighted in care plans and staff were able to describe these.

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 service had good links with the local community and used these to help ensure people were not socially isolated.
- When people had support to follow interests, staff were creative in offering people different opportunities that were tailored to their tastes and preferences. Records showed people appreciated the effort staff put in to provide meaningful opportunities.

Improving care quality in response to complaints or concerns

- Complaints and concerns were taken seriously and used as an opportunity to improve the service. They were recorded alongside what action had been taken.
- People told us they had no concerns with the service but would feel confident sharing any they had.

End of life care and support

- Where appropriate, people's end of life preferences had been sought.
- Staff described the importance of also supporting people's family members at this time.

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.

This is the first inspection for this newly registered service. This key question has been rated Good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

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

- The provider's guide about the service included, "We recognise the importance of ensuring you are enabled and supported to live a full life and the vital impact that this has on your physical, emotional, social and spiritual wellbeing." Staff had clearly adopted this ethos and enthusiasm and this showed in the way they talked about the support they provided for people.
- People gave positive feedback about their experience of the service. One person told us, "I am really happy with the service" and a relative commented, "Kensley carers are good and I would recommend them."
- A new staff member told us, "I was really impressed with the service's interest in and interaction with people. They put a lot of value on that side of things as much as on the personal care side of things."

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 registered manager promoted the ethos of honesty, learned from mistakes and admitted when things had gone wrong. This reflected the requirements of the duty of candour.

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

- There were clear lines of responsibility and accountability within the management structure. The deputy manager took responsibility for the day to day running of the service. The registered manager oversaw the service and completed quality checks of records and practice.
- People told us they thought the service was well led and staff were positive about how the service was run.

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

- People were regularly consulted for their views of the service. Any suggestions were incorporated into their support, where possible. One relative told us, 'Communication is excellent.'
- Staff were encouraged to suggest new ideas for how people were supported. These were then discussed with the staff team and had resulted in positive outcomes for people using the service.
- A social care professional told us the service had successfully worked with and improved the lives of some people with complex needs.

Continuous learning and improving care

- The registered and deputy managers were involved in various local and national forums which they used to help them stay up to date and source new ideas.
- Quality checks of the service were completed regularly. Any improvements identified were recorded and acted upon to improve the overall quality of the service.

Working in partnership with others

- The home worked in partnership with key organisations to support care provision and ensure people received the support they needed.
- A social care professional told us the managers were open and happy to share information and do what they could to improve people's lives.