

C & S Homecare Ltd

C & S Homecare Limited

Inspection report

113b Nottingham Road
Alfreton
Derbyshire
DE55 7GR

Tel: 01773836111

Website: www.cshomecare.co.uk

Date of inspection visit:
26 October 2023

Date of publication:
06 November 2023

Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

We expect health and social care providers to guarantee people with a learning disability and autistic people respect, equality, dignity, choices and independence, and good access to local communities that most people take for granted. 'Right support, right care, right culture' is the guidance CQC follows to make assessments and judgements about services supporting people with a learning disability and autistic people and providers must have regard to it.

About the service

C & S Homecare Limited is a domiciliary care agency which provides personal care at home services. The service mainly provides support to older people but can also support people who have learning disabilities and autistic people. At the time of our inspection there were 41 people receiving a personal care service from C & S Homecare Limited.

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

Right Support

Staff focused on people's strengths and promoted what they could do, so people could maintain their independence as far as possible. Staff communicated with people in ways which met their needs. Staff supported people with their medicines in a safe way and supported people to access community health services when necessary.

People were supported to have maximum choice and control over the care they received from the provider 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.

Right Care

People received kind and compassionate care. Staff protected and respected people's privacy and dignity. They understood and responded to their individual needs. Staff understood how to protect people from poor care and abuse. The service worked well with other agencies to do so. Staff had training on how to recognise and report abuse and they knew how to apply their knowledge. The service had enough appropriately skilled staff to meet people's needs and keep them safe. People's risk assessments and care plans reflected their range of needs, and this promoted their wellbeing and enjoyment of life.

Right Culture

People received good quality care, support, and treatment because trained staff could meet their needs and wishes. Staff knew and understood people well and were responsive, supporting their aspirations to live a quality life of their choosing. Staff turnover was very low, which supported people to receive consistent care

from staff who knew them well. Staff placed people's wishes, needs, and rights at the heart of everything they did. People, and those important to them, were involved in planning their care.

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 21 August 2018).

Why we inspected

We undertook this focused inspection to check whether the previous rating was still accurate, given the length of time since the last inspection. We reviewed the key questions of Safe and Well-led only. For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating. The overall rating for the service has remained Good, based on the findings of this inspection

Follow up

We will continue to monitor information we receive about the service, which will help inform when we next inspect.

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.

C & S Homecare 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 Health and Social Care Act 2008.

Inspection team

The inspection site visit was carried out by 1 inspector. An Expert by Experience also supported the inspection by contacting people, and their relatives, by phone, to obtain feedback on the service people received. 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.

Registered Manager

This provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations.

At the time of our inspection there was a registered manager in post.

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 registered manager would be in the office to support the inspection.

What we did before the inspection

We used the information the provider sent us in the provider information return (PIR). This is information

providers are required to send us annually with key information about their service, what they do well, and improvements they plan to make. We also used information previously gathered as part of monitoring activity which took place on 6 September 2023. We used all this information to plan our inspection.

During the inspection

We spoke with 4 people and 10 family members of people who use the service. We spoke with the registered manager and administrator at the provider's office. We received feedback from 13 care staff. We reviewed 3 staff recruitment files and elements of 4 people's care plans and risk assessments. We reviewed various care records and copies of the provider's policies and procedures. We also received feedback from an external social care professional who had regular contact with 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 our last inspection we rated this key question Good. The rating for this key question has remained Good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People were safeguarded from abuse and avoidable harm. A person told us, "I trust them (staff) and feel very safe as I have regular carers. I have great confidence in them (staff)."
- Staff received training in how to ensure people were safeguarded from the risk of abuse or neglect. This included how to raise concerns externally to the local authority safeguarding team, and CQC, if necessary.
- The provider had safeguarding policies and procedures in place which were regularly reviewed and up to date.

Assessing risk, safety monitoring and management

- The provider assessed risks to ensure people were safe. Staff took action to mitigate any identified risks.
- People had their individual risks assessed by the registered manager, and this was used to inform the care plans which care staff followed when they supported people.
- People's risk assessments and care plans were regularly reviewed and updated by the registered manager if people's needs changed.
- The provider carried out an initial environmental risk assessment, when new referrals were received, to identify any potential risks associated with the person's housing. This helped to ensure that people and staff were safe when care tasks were being carried out.

Staffing and recruitment

- The provider ensured there were enough suitably skilled and trained staff available to meet people's care needs. A staff member told us, "We have enough staff and, if we are ever short, we all pull together to make sure the clients receive their care."
- The registered manager told us they only accepted new care referrals when they had the care staff already available to provide the required support to people. This meant the provider was not overstretched and consistency of support for people was maintained.
- The registered manager told us they had a stable staff team, with many staff having worked for the provider for several years. For example, a staff member told us, "I love my job and the company as a whole! Our boss is brilliant at what they do, nothing is too much trouble, and they will help with any difficulties you may have."
- The provider operated safe recruitment processes. This included ensuring references were obtained and Disclosure and Barring Service (DBS) checks were carried out on all staff. DBS checks provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.

Using medicines safely

- People were supported to receive their medicines safely. For example, a person's relative told us, "The carers sort out [Person's] tablets into boxes and there have never been any incidents, medicines are managed very safely."
- The provider had a suitable medicines policy and procedure in place. This included a process for identifying and dealing with any medicines errors if they should occur.
- Staff received training in how to safely check people's prescribed medicines before administering them.
- Records of when medicines were administered to people were kept on the provider's electronic care record system, which was regularly checked by the registered manager.

Preventing and controlling infection

- People were protected from the risk of infection as staff were following safe infection prevention and control practices.
- The provider had adequate stocks of personal protective equipment (PPE) for staff to use when supporting people with care tasks.
- Staff had received infection prevention and control training and the provider supported care staff to access flu and Covid-19 vaccines.
- The provider had an infection prevention and control policy and procedure in place which was regularly reviewed and updated.

Learning lessons when things go wrong

- The provider learned lessons when things had gone wrong.
- For example, the registered manager told us about an incident where a person's prescribed medicine had been changed by the local pharmacy without the provider being notified. This led to a minor medicines error which was quickly spotted by the registered manager.
- The provider reviewed this error to understand what had caused it and how it may be prevented in the future. The registered manager then took the necessary action to share the learning from this incident with staff, the person, and their family.

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 our last inspection we rated this key question Good. The rating for this key question has remained 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

- There was a positive and open culture at the service. For example, a person's relative told us, "The manager does listen and takes on board what is said and deals promptly with issues."
- A staff member told us, "When we have any suggestions [registered manager] always listens and encourages us to raise things, they want us to come forward with our ideas. It's a nice company to work for."
- The provider's electronic care record system could be viewed online by people, and their family members, if they wished. This meant people and their family members could see their own care plans and details of care visits. This demonstrated the provider's open and inclusive approach.
- The provider had systems to provide person-centred care that achieved good outcomes for people. For example, a person's ability to manage their own diabetes had improved because of the support received from the provider's staff. Staff had received specific training which meant they were able to support the person to better manage their diabetes independently. Staff also then knew what to look out for to ensure medical advice was obtained for the person if needed.

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 under the duty of candour.
- The registered manager ensured relevant people were informed, and apologies were given, when things went wrong.

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

- The provider had a clear management structure that monitored the quality of care to drive improvements in service delivery.
- The registered manager occasionally worked care shifts and knew each person who received care. This helped them to understand people's care needs and enabled them to monitor the competencies of care staff.
- The registered manager carried out regular routine checks of care and medicines records to ensure that all tasks had been carried out by staff. The provider's electronic care record system assisted the registered manager in this, as it would send an alert if a care task was late or had been missed.
- The registered manager understood their responsibility for notifying the CQC and local authority about various types of occurrences. This helps the relevant statutory agencies to monitor the safety of the service

being provided to people.

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

- People and staff were involved in the running of the service. The provider carried out regular satisfaction surveys and obtained feedback from people, their relatives, and staff, about what the service does well and areas for improvement.
- The registered manager reviewed the results of those surveys and then took action to address people's individual concerns and any general improvement themes which were apparent.
- People's protected characteristics were understood and considered by the provider and staff. Staff received equality and diversity training as part of their basic training, and the provider's policies and procedures supported that.

Continuous learning and improving care

- The provider had created a learning culture at the service which improved the care people received.
- The provider told us they had introduced electronic care records into the service and had seen the quality of records increase as a result.
- People and their relatives also told us they found the new care record system to be an improvement as they could now access it themselves if they wished.
- Staff told us they were proud to work for C & S Homecare Limited. For example, a staff member told us, "I have received, completed, and am up to date with all the training courses. I have received the best help and support in my time at the company. I actually don't think there is any area of the company that I can think needs improvement."
- The registered manager actively sought out feedback from people about how the service might improve. For example, a person's relative told us, "The manager said to me she wants relatives to raise concerns at any time, so she can deal with any problems and ensure it doesn't happen again." Another person's relative told us, "They are a fantastic care company, and we are so happy with everything. I can't think of a thing that needs to be improved."

Working in partnership with others

- The provider worked in partnership with others. The registered manager had effective links with local community health teams and GP surgeries. This helped ensure people got access to the healthcare support they needed.
- Feedback from an external professional was positive. They told us, "Staff and management are approachable, friendly, and attentive in their service delivery. I also found them to be resilient in their care delivery where there were complexities or issues surrounding the individual they were supporting."