

Town & Country Care (Boston) Limited

Town and Country Care

Inspection report

The Ridlington Centre
Sibsey Lane
Boston
Lincolnshire
PE21 6HB

Tel: 01205354329

Date of inspection visit:

13 March 2020

17 March 2020

18 March 2020

24 March 2020

Date of publication:

29 May 2020

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

Town and Country Care provides personal care to people living in their own home, primarily in the Boston area of Lincolnshire. At the time of our inspection approximately 72 people were receiving a personal care service.

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 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 and those who were important to them were fully involved in planning the care they needed and determined how they wanted their care provided. People were treated in a caring and thoughtful manner by staff who respected their privacy, dignity and individuality.

Staff had the knowledge, skills and support to provide a good quality of care for people who used the service. There were enough staff employed to ensure people's needs could be met in a consistent and timely way.

Care was planned and delivered to ensure people remained safe. This included minimising the risks of accidents and incidents occurring. Staff knew how prevent and control the spread of infection and support people with medicines in a safe way. They understood how to identify signs of abuse and how to report any concerns of that nature.

The provider had systems in place to ensure people, their relatives and staff were involved in the development of the service and could express their views and opinions. There were also effective systems in place for managing any concerns or complaints they received.

There was an open and inclusive approach to the management of the service. Quality assurance systems were effective in driving improvements in the provision of 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 2 August 2017).

Why we inspected

This was a planned inspection based on the previous rating.

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 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 well-led.

Details are in our well-led findings below.

Good ●

Town and Country Care

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

The inspection was carried out by three inspectors.

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

This inspection was announced. We gave a short period of notice for the inspection because we needed to be sure that the provider or registered manager would be in the office to support the inspection.

Inspection activity started on 13 March 2020 and ended on 24 March 2020. We visited the office location on 13 March 2020.

What we did before the inspection

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. 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 three people who used the service and five relatives about their experience of the care provided. We also spoke with three members of care staff, the registered manager and the provider.

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

After the inspection

We continued to seek clarification from the provider to validate evidence found.

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 remained the same. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People and their relatives told us they felt safe with the staff who supported them. One person said, "I feel really safe with them." A relative told us, "We feel the service provided is safe... they all wear uniforms and badges, this means we have no worries about who is coming in and [family member's] safety."
- Staff had received up to date training about how to keep people safe from the risk of abuse. They demonstrated their understanding of how to report any concerns they had, either to the provider or external agencies such as the local authority.

Assessing risk, safety monitoring and management

- Risks to people's safety and welfare were assessed and regularly reviewed with them. Records showed plans were in place to minimise risks such as developing skin damage and using hoisting equipment.
- People who used the service confirmed this when we spoke with them. One person told us about how staff had worked with them to make sure they would remain safe when they returned from a stay in hospital and all their care needs could be met.
- A staff member told us, "Risks are checked at the time we look at starting to give care and then they are reviewed and checked regularly with the person. It's important to know if there has been any changes."

Staffing and recruitment

- Enough staff were employed to provide timely and consistent care for people. One person said, "The staff are usually on time, if they are ever late it's mainly due to traffic, especially tractors. I have never experienced a missed call." Another person told us, "There are very few changes [to staff]. I know the carers who visit me very well."
- The provider had an on-going recruitment programme in place. Staff told us and records showed recruitment checks were carried out prior to them starting work to ensure they were suitable to work with people who used the service.
- The provider had considered and planned for how they would maintain people's care calls in the event of staff shortages as a result of the emerging national healthcare crisis.

Using medicines safely

- Staff had received training in the safe administration of medicines and people's care records guided them about how people wanted their support to be given.
- Most people we spoke with did not require support with their medicines at the time of the inspection. However, staff told us they were trained and confident to provide support whenever it was required.

Preventing and controlling infection

- Staff had received training about how to prevent and control the spread of infection. People and their relatives consistently told us staff used personal protective equipment (PPE) such as gloves and aprons when providing care. They also told us how staff regularly washed their hands and used hand sanitisers.
- The provider had considered and planned for how they would maintain and distribute stocks of appropriate PPE to staff in light of the emerging national healthcare crisis.
- The registered manager and provider were aware of up to date guidance and the local and national support available regarding preventing and controlling the spread of infection.

Learning lessons when things go wrong

- The registered manager and provider reviewed incidents which occurred within the service to ensure they learned lessons and made improvements to the care provided. We saw an example of this where staff had received further training and supervision following an incident. The provider had also reviewed policies and procedures and made changes to the way care was delivered.

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 had received an assessment of their needs prior to using services. People and their relatives told us how staff worked with them to ensure all identified needs could be safely met.
- In addition, assessment records showed the registered manager gathered information from, for example, social workers and service commissioners to ensure people's assessments were robust and accurate.
- Assessment tools were in place to ensure planned care reflected good practice guidelines and legislation.

Staff support: induction, training, skills and experience

- Staff told us they received an induction and shadowed experienced staff when they started to work for Town and Country Care. They added that on-going training was also available to ensure their knowledge remain up to date and they could develop their skills further. A staff member told us, "I think the training is good and we have time for this. Refresher training is given for the key areas we need to keep up with."
- People and their relatives consistently told us they thought staff had the right skills to meet their needs. One person said, "If new staff visit and the experienced staff are teaching them, the new member of staff doesn't get in the way. They stand to one side and learn how we like things done."
- Staff told us they were well supported by the registered manager and the provider. One staff member said, "We have supervisions and keep in touch through the provider's communications and team discussions." Another staff member said, "[Registered manager] is massively supportive."

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

- People's nutritional needs were assessed and where needed they were supported to access specialist nutritional services.
- People told us if they needed support with eating and drinking, staff made sure they had what they wanted and needed. One person told us, "One of the big issues I had previously related to me needing to drink more... the staff are good at helping me keep things working." Another person said, "The staff help ensure I have enough to eat and drink and give me a good level of care."

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

- People's care plans contained information about their health care needs and how staff should support them. Staff were knowledgeable about people's health needs and knew how to contact the right health care professionals if needed.
- A relative described how Town and Country Care had worked with hospital staff to support their family member to return home. The person needed increased support due to their health care needs and the

relative said staff had understood the needs and supported them well.

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 care plans provided staff with guidance about their ability to make decisions for themselves and what support, if any, they needed to do so.
- Staff had received training about the MCA. Decisions made in a person's best interests were recorded.
- One person told us, "The staff work with me and really listen to what I want and how I want things done." A relative said, "They ask us and [family member] before they do anything and we all feel part of the care process."

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; Respecting and promoting people's privacy, dignity and independence; Supporting people to express their views and be involved in making decisions about their care

- People and their relatives consistently told us staff treated everyone with respect and maintained their privacy and dignity. One person said, "It's frustrating when you have been used to being independent then have to rely on others; the staff are good at understanding this and letting me be the person I am with respect." A relative told us, "[Staff] are very caring and respect both of our privacy. When they give care [they do it] privately which I think is very good."
- A person told us how the registered manager and provider had supported their wish to have same gender staff to provide their care. They said, "This means we do have choice which is respected."
- Everyone we spoke with told us staff involved them in all aspects of their care. When speaking about being involved in their care, a common theme people mentioned as being key to this was the opportunity to build relationships with a core team of staff. One person said, "It's nice to have someone to talk to. This means it's not just about giving care they have to give but that they really care about us as people too." A relative told us, "We've got to know them and it's good to know who's coming in. It builds that trust between us."
- An example of the consistently positive feedback we received was from one person who said, "Staff are caring, very caring. I can honestly say I have never seen staff in a dodgy mood. They are always cheerful. It helps me to stay positive."

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 ensure people have choice and control and to meet their needs and preferences

- Care plans were up to date, regularly reviewed and reflected the care people told us they needed. Everyone we spoke with told us they had a copy of their care plan which staff followed.
- One person told us how staff and the registered manager went through their care plan with them regularly. Another person told us, "Staff carry out reviews to check I'm ok [with care plan]. I had one last week with [the provider]. This was held to check, update and refresh my notes." A relative told us the registered manager had recently visited with staff, "To check how things were going."

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 registered manager and the provider was aware of their responsibility regarding AIS. People's communication needs were assessed and recorded in care plans.
- People told us they had the information they needed to understand how the services they received should be provided.
- Information could be made available in different formats to meet people's needs if required.

Improving care quality in response to complaints or concerns

- People and their relatives told us they knew how to raise concerns and make a formal complaint if they needed to. One person said, "I can complain if I want to but haven't had the need." A relative told us, "I know exactly how to raise informal worries or issues and who to speak with. If I wanted to make a complaint I think they would really listen. I have nothing to complain about."
- The provider had a complaints procedure in place which set out how complaints would be managed. Records showed that any concerns or complaints raised with the provider had been managed in line with the policy.

End of life care and support

- The registered manager and provider told us they do not routinely care for people who are approaching the end of their lives. However, if they did they were confident they would be able to provide safe and personalised care which would include working with other health care professionals such as hospice services or Marie Curie nurses.
- One person told us, "My health is deteriorating and I know that when the time comes the staff support will

be able to increase to whatever is needed to keep things consistent. This is something I am confident the staff can help me with."

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 remained the same. 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; Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; 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 and provider had worked to create an open and person centred culture within the service. One person told us, "I know [name of provider] and the manager very well and know I can call them any time if I have any questions." Another person said, "If I have any issues or want to check things related to my care I call the office and they have never not answered my calls." A relative also commented, "I think it's a well-run service and the company seem trustworthy. I know the manager and the owner and feel I can call them at any time I need to."
- Staff were positive in their views about working for Town and Country Care. They made comments such as, "[The registered manager and provider] are good with their communication to us. I'd say spot on," and "It's a good company to work for and I think the manager is very supportive to us and easy to talk to. We work as a team."
- Arrangements were in place for staff to access support from senior staff outside normal working hours. This on-call rota included the registered manager and the provider.
- The registered manager and the provider understood their responsibilities regarding duty of candour legislation. The feedback we received from people using services, their relatives, staff and external professionals demonstrated this.
- The registered manager and the provider had notified us about events which happened in the service in line with regulatory requirements.
- Quality audits were carried out to improve the service. This included observing the personal care provided by staff.
- The registered manager told us they were fully supported by the provider. We saw the provider was fully involved in all aspects of the service provision and made themselves available for people who used the service and staff.
- The provider had set out contingency plans to ensure they could continue to deliver care services in a safe way during the emerging national healthcare crisis. This included how they would maintain staffing levels and the supply of PPE for staff.

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

- People and their relatives told us they had the opportunity to give feedback about their care through

regular questionnaires. The registered manager analysed the responses and took action to address any issues raised. Although we saw only positive feedback had been received about people's care, some people wanted the questionnaires sent out less frequently. We saw the registered manager had amended their quality assurance systems to ensure they addressed people's comments.

- Staff told us they had regular discussions with the registered manager and the provider and felt able to raise any issues they had. They were aware of the provider's whistleblowing procedures and felt comfortable to use them. A member of staff said 'they felt listened to' and their views were respected.
- The registered manager told us they were changing the way in which training was delivered as they had sought feedback from staff about how they best learn as individuals.
- The registered manager and the provider had developed effective working relationships with local health and social care professionals. This meant they were able to support people to get the right care at the right time.
- The registered manager kept themselves up to date with good practice by, for example, accessing CQC guidance and attending training. They also encouraged the staff team to develop their skills, for example, by gaining qualifications to deliver training to their colleagues.