

Kirsten's Care Ltd

# Kirsten's Care Ltd

## Inspection report

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10 May 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

Kirsten's Care Ltd is a domiciliary care agency providing personal care to adults in their own homes. Not everyone who used the service received the regulated activity of 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 this inspection, the service was providing personal care to 40 people.

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

People and their relatives were satisfied with the care provided by Kirsten's Care Ltd. People were involved in making decisions about their care and told us they felt safe and comfortable in the company of the staff who knew them well and were kind and caring.

People were supported by a regular staff team who were safely recruited and who had the relevant training and qualifications to safely support them. There were sufficient staff to meet people's needs and ensure no care calls were missed.

Staff understood how to protect and safeguard people. Risks to people were assessed and mitigated, which reduced the risk of harm.

Where people required support with their dietary needs, health and with their medicines, this was carried out safely. Infection control processes protected people from the risks of cross infection.

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.

Systems to monitor the quality and safety of the service were in place. Staff reported having a positive relationship with the provider and felt communication was effective. Quality monitoring systems allowed for effective monitoring of the service by the provider.

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

This service was registered with us on 1 August 2019 and this is the first comprehensive inspection where we have provided a rating for the service. In December 2020 we carried out a targeted inspection to review staff recruitment and induction training following some concerns being raised. At this inspection we found improvements had been made.

### 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 ●

# Kirsten's Care Ltd

## 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 completed by two inspectors. Following the visit to the location office, an Expert by Experience completed telephone calls to people and 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 homes in the community.

The service had a manager registered with the Care Quality Commission. They were also the provider of the service. This means they are legally responsible for how the service is run and for the quality and safety of the care provided. They have been referred to as 'the provider' throughout the report.

#### Notice of inspection

We gave the service 24 hours' notice of the inspection. This was because it is a domiciliary care service where staff are often out supporting people. We needed to be sure that the provider would be in the office and available to support the inspection.

Inspection activity started on 28 April 2021 and ended on 10 May 2021. We visited the office location on 28 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.

#### During the inspection

We visited the office location on 28 April 2021. We reviewed a range of records which included risk assessments and care records for three people, three staff files in relation to recruitment, accident and incident records, contingency plans and management monitoring and oversight records.

#### After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at training data and quality assurance records. We spoke with two people who receive care and support from Kirsten's Care Ltd about their experience and five relatives. We also had electronic feedback via email from a further four relatives and six staff members.

# 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 ratings 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 told us they felt safe with the staff supporting them. One person told us, "I feel safe, staff wear masks, aprons and gloves and wash their hands." A person's relative told us, "Yes, I would say without question [family member is safe]. I haven't had any concerns. If I had any, I would speak to the manager, I would email them. I feel the owner recruits' good [staff] with a good attitude."
- Staff had received safeguarding training and understood their roles and responsibilities in keeping people safe from harm. They raised safeguarding concerns appropriately if they were worried about people's safety.
- The providers safeguarding policy included information on how staff could report safeguarding concerns, including directly to the Local Authority safeguarding service should they need to do so.

Assessing risk, safety monitoring and management; Learning lessons when things go wrong

- People's care records included risk assessments which informed staff on how to reduce the risks in people's lives. This included risks associated medicines and with moving and handling.
- The service had sought input from external healthcare professionals, where appropriate, with regard to mitigating actions for staff to take, to safely support people and reduce the risk of harm.
- Where incidents and accidents occurred, they were recorded with appropriate actions taken to reduce the risk of re-occurrence.

Staffing and recruitment

- People and their relatives told us their care calls were reliable and usually on time. The service covered a rural area and there were, at times, delays. One person's relative told us, "Calls are four times daily and there are always staff on hand. Sometimes call times change, but we understand that we have to be flexible if another [person] requires urgent or specific help. The staff on the rota are the staff that arrive." Another relative said, "I believe care calls are on time and [family member] receives what their needs are every day and sometimes much more by way of staff spending time with them. [Family member] is treated like family by staff."
- There were sufficient staff with the right skills and experience to meet the individual needs of the people who used the service.
- Staff were recruited safely. The required pre-employment checks were now being completed to help ensure staff employed were suitable. These included conducting an interview, completing a Disclosure and Barring Service (DBS) check and obtaining references. The DBS helps to prevent unsuitable staff from working with vulnerable people.
- The provider explained the work they had completed, since our last targeted inspection, to improve their

staff recruitment process and the checks they carried out prior to any new employee commencing work at the service.

#### Using medicines safely

People and their relatives told us that they received the support they needed with any medicines. One person's relative told us.

- Information regarding the support people needed with their medication was recorded within their care plans and was clear, up to date and accessible to staff.
- Staff received training in medicines management and had their competency regularly assessed.
- Regular checks and audits of the medicines system were carried out to ensure it continued to be managed in a safe way.

#### Preventing and controlling infection

- Staff had completed infection control training and had access to personal protective equipment (PPE), such as aprons, masks and gloves to help reduce cross infection risks.
- People and their relatives told us they felt confident with the infection control practice of staff who wore PPE to minimise the risk of the spread of infection. One person's relative said, "They [staff] always wash their hands at a different sink as to where they provide care. They wear protective goggles, mask, apron and gloves."
- Staff told us they felt supported whilst working through the COVID-19 pandemic. One member of staff said, "PPE has been readily available, COVID 19 tests are always in stock and we have up to date emails sent with regard to donning and doffing PPE." Another staff member commented, "We have been well supported throughout this pandemic. We have had guidance sent regularly showing us when guidelines change for PPE etc and we have done online training throughout the pandemic when unable to do in house training, so we have not missed out."



# 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 feedback confirmed this.

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

- People's needs were assessed before any care was provided, with family members and or significant others involved in the process as much as possible and according to the persons wishes.
- Information gathered during assessments was used to create individual plans of care and support. These plans reflected people's needs, including aspects of their life which were important to them.

Staff support: induction, training, skills and experience

- People and their relatives told us that they felt that the care workers had the skills to meet their needs. A person's relative told us, "They [staff] are trained by experienced staff."
- Care staff were positive about the training, support and induction they had received. One staff member commented, "I feel there are plenty of opportunities for new training within my role. I feel confident enough to ask when I feel something may benefit me or others. I have two upcoming training sessions booked within the next two months."
- Staff received regular one-to-one supervision as well as spot checks of their performance to offer both support and monitoring of their performance.
- Records showed that training provided included safeguarding, moving and handling, and medicines amongst others.

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

- Where people required support with their dietary and hydration needs staff worked in accordance with their care plan.
- Information was documented in people's care records which provided guidance for staff on how to meet individual needs and preferences. Within each person's care plan there was information about any allergies to food which were to be avoided.

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

- Where necessary, the service worked with other services to deliver effective care and support.
- People's relatives told us if their family member was unwell, staff acted promptly to seek advice from health professionals. One relative said, "On many occasions the [provider] and the team have highlighted and dealt with infections that [family member] has needed treatment for while also managing their medications and assisting with the daily routine. In addition, direct contact with doctors and being first point of contact. That is first class care indeed."
- People's records showed that where other professionals were involved their input and any

recommendations were acted on by staff and included in care plans. One professional commented, "We have not had any reason to be concerned. They [Kirsten's Care] are responsive to individuals changing needs."

#### 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, and whether any conditions on authorisations to deprive a person of their liberty had the appropriate legal authority and were being met.

- People and their relatives told us the staff consistently sought their consent before providing any care or support. One relative said, "It is part of their [staff] training that they have to ask [seek permission]."
- People were fully involved in decisions about their care and their capacity to do so was respected.
- Staff received training on the Mental Capacity Act which covered obtaining peoples consent prior to delivering any care and the principles of the MCA.

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

- People told us that their care staff treated them with kindness and respect. "If I am feeling down, they give me cuddle and I felt a lot better." Relatives were equally positive about the care their family member received. One relative said, "My [relative] receives excellent care from Kirsten's care." Another relative commented, "They are nice with [family member], they hold their hand ask what they can do for [person]. They are all nice and some are excellent."
- Care staff assisted people in accordance with the person's wishes and their individual care plans and preferences. One person said, "They always ask if I want the curtains drawn, when they do any personal care."
- People's relatives told us that their family member was involved in the decisions about their care and support. One relative said, "[Family member] has their views taken into account and is very much part of the discussion of how care is provided and is deeply respected. The staff are very kind and caring."
- People held copies of their care plans in their own homes, so they could access them and check for accurate information. There was also information on who to contact outside of their normal visits and office hours in case of an emergency.

Respecting and promoting people's privacy, dignity and independence

- People and their relatives told us staff treated them with dignity and with respect.
- People's privacy and dignity was respected at all times. A relative said, "I have never had reason to think otherwise, they care for [family member] in private and show respect." Another relative said, "[Staff] do offer privacy and they are discreet about who else they visit."
- Staff knew people well including their preferences for how they liked their care and their personal life histories and their families.

# 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 had care and support plans that were reviewed regularly and amended when people's needs changed. People's relatives were appropriately involved where necessary. One relative told us, "Yes, there is a meeting with [family member] and I am invited, these occur when necessary."
- Care plans provided staff with guidance on how to respond to people's needs according to their preferences including steps for staff to follow at each visit.

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 was complying with AIS and where required information could be provided to people in alternative formats such as pictorial format, large print and easy read to enable them to access the information in a way they could understand.

Improving care quality in response to complaints or concerns

- A complaints process was in place. Records showed that any complaints received were dealt with in line with the complaints policy.
- The majority of people and their relatives told us they had no reason to raise a concern or complaint about the service provided. One relative said, "[We] have never needed to complain and have great lines of communication with Kirsten's care. We have worked as a team with Kirsten's care to provide support, love and the care tailored to [person] to maintain their living arrangement and much much more."

End of life care and support

- Whilst no one was currently approaching the end of their life, the service did offer people the option of receiving end of life care in their own homes. Staff had received training in order to support people to do so.
- The service linked up with external healthcare as required to ensure people were well supported and enabled to have their end of life wishes met wherever possible.

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

- Overall feedback from people who used the service and relatives was complimentary about Kirsten's Care. Both people and their relatives told us they were satisfied with the care they received, and most would recommend the service to other people. One relative said, "We have been absolutely delighted and truly grateful for all that [provider] and the team have done. It has given us real reassurance that [family member] is safe, well, loved and cared for. The care has been outstanding." Another relative told us, "They [Kirsten's Care] go above and beyond and the effort they put in is amazing, they make some extra effort in encouraging [family member] and that makes it worthwhile."
- People and relatives said there was a positive culture in the staff team and staff confirmed they were happy working for the service. One staff member said, "When you visit the office you can see [provider's] passion for the people she supports."
- The service had appropriate quality assurance and auditing systems in place designed to drive improvements in performance and to maintain effective oversight.
- Spot checks of staff practice were completed regularly to monitor the quality of care provided to people.
- Processes were in place to ensure people's care was regularly reviewed, and any changes or improvements were acted upon in a timely manner.
- Staff were positive about working for the service and how they were supported in their work. A staff member told us, "Management are very approachable and if I need to talk to [provider] always listens. I also use the feedback form on our app to report issues or make suggestions about 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; Continuous learning and improving care

- The provider understood their responsibility to be open and honest if something went wrong. Apologies were given to people, where needed, and lessons were learnt.
- Notifiable events had been reported to CQC as required and the provider was aware of their responsibilities around this.
- The Duty of Candour regulation requires that safety incidents are managed transparently, apologies are provided and that 'relevant persons' are informed of all the facts in the matter.

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

- People, relatives and staff were asked for their feedback to enable the provider to learn from feedback and find ways to continuously develop the service.
- Staff told us communication with management and office staff was good. One staff member commented, "I love my job and everything about it. Communication from the office staff is great, we get updated as needed."
- Staff worked closely with other health care professionals where needed to meet people's care support needs. A healthcare professional told us, "We have not had any reason to be concerned. [Kirsten's Care] are responsive to individuals changing needs... communication is always very prompt and thorough, and they update [us] in a timely manner."