

Kosi Ltd

Kosicare Ltd

Inspection report

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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

Kosicare Ltd is a domiciliary care agency. It provides personal care to people living in their own houses and flats in the community. Care Quality Commission (CQC) only inspects the service being received by people provided with 'personal care', that is help with tasks related to personal hygiene and eating. Where they do this, we also take into account any wider social care provided.

At our last inspection of the service in July 2018 we were not able to rate the service because only one person was being provided support and we did not have sufficient evidence of consistent good practice over time. However, we found no information or evidence at that time to demonstrate any serious risks or concerns about the service and the care provided.

Since the last inspection the service has moved location to a new address but remains based in London Borough of Croydon. This inspection took place on 21 January 2019. At the time of this inspection four people were using the service. There was no evidence or information from our inspection and on-going monitoring that demonstrated serious risks or concerns.

People received care and support from the service that had been planned and agreed with them. People's choices for how support was provided were respected and staff delivered this in line with their wishes.

Staff supporting people, understood their needs and how these should be met. They encouraged people to be involved in aspects of their personal care to promote their independence. Staff treated people with respect and maintained their dignity and privacy when providing support.

Staff supported people to eat and drink enough to meet their needs. Records maintained by staff after each scheduled visit helped to keep everyone involved in people's care informed and up to date about the support provided to people. Staff demonstrated a good understanding of people's healthcare needs and how they should be supported with these in a timely and appropriate way. Staff ensured people received their medicines as prescribed.

Staff remained aware of possible signs of abuse and how to report their concerns about people's safety to the appropriate persons and agencies. Staff understood the risks posed to people and followed guidance about how these should be minimised to keep people safe from injury or harm. Staff followed good practice to ensure risks were minimised from poor hygiene and cleanliness when providing personal care and when preparing and handling food.

There were enough staff to meet people's needs. Staff continued to receive relevant training to help them meet people's needs and were supported by the registered manager to continuously improve in their role to help them provide effective support to people.

Staff were aware of their responsibilities in relation to the Mental Capacity Act 2005 (MCA) and supported

people in the least restrictive way possible. The policies and systems in the service supported this practice.

The provider had systems in place to monitor and review the quality of service and to deal with any complaints made about the service. Records relating to people, staff and to the management of the service were accurate and up to date.

The service continued to have a registered manager in post. The registered manager was aware of their registration responsibilities particularly with regards to submission of statutory notifications about key events that occurred at the service.

The provider worked in partnership with local authorities and organisations funding people's care, so they were kept up to date and well informed about people's care and support needs. The provider was building relationships with local authority commissioning teams to raise the profile of the service and in this way hoped to grow the business further.

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 good. Staff were aware of possible signs of abuse and how to report their concerns about people's safety.

Risks to people had been assessed and staff understood how these should be minimised to keep them safe. People received their medicines as prescribed.

There were enough staff to support people. Staff followed good practice to reduce infection risks when providing personal care and when preparing meals.

Good 

Is the service effective?

The service was good. The needs of people using the service had been assessed. Staff continued to receive training to meet these needs and were supported to continuously improve their working practices.

Staff worked closely with healthcare professionals involved in people's care and reported any concerns they had about people so that appropriate support was obtained for them when required.

People's consent was sought before any support was provided to them. Staff were clear about their responsibilities in relation to the Mental Capacity Act 2005.

Good 

Is the service caring?

The service was good. Staff were kind and caring.

People were supported by staff they were familiar with which helped to ensure continuity and consistency in the level of support they received.

Staff treated people with dignity and respect and people were supported to be as independent as they could be.

Good 

Is the service responsive?

The service was good. People contributed to planning their care

Good 

and support needs. Their care plans set out how support should be provided.

The provider monitored that people received timely and responsive support from staff.

There were arrangements in place to deal with complaints should these arise.

Is the service well-led?

The service was good. The registered manager was accessible, supportive and responsive to people's needs. They understood their registration responsibilities and adhered to these.

People's views about the service were sought. These were used along with audits and checks to review and improve the quality of service people experienced.

The provider worked in partnership with others to continuously improve the delivery of care to people.

Good ●

Kosicare Ltd

Detailed findings

Background to this inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection checked whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

This inspection was announced and took place on 21 January 2019. We gave the provider one week's notice of the inspection because senior staff are sometimes out of the office supporting staff or visiting people who use the service. We needed to be sure that senior staff would be available to speak with us on the day of our inspection. The inspection team consisted of a single inspector.

Before the inspection we reviewed the information, we held about the service. We used information the provider sent us in the Provider Information Return. This is information we require providers to send us at least once annually to give some key information about the service, what the service does well and improvements they plan to make. We also looked at statutory notifications submitted by the provider. Statutory notifications contain information providers are required to send us about significant events that take place within services.

During the inspection we visited the provider's office and spoke to the registered manager. We looked at the care records of four people using the service. We also looked at other records relating to staff training and supervision and to the management of the service. After the inspection we spoke to two relatives of people using the service and asked them for feedback.

Is the service safe?

Our findings

Relatives said people were safe with staff. One relative told us, "We feel very safe with the staff and they keep the same carers. [Family member] recognises all the staff and that familiarity is so important as this helps keep them safe. I feel we can trust all the staff in our home."

Staff remained aware of signs of possible abuse and the processes they should follow to report concerns about a person's safety or welfare. The registered manager understood their responsibility to liaise with the local authority if safeguarding concerns were raised. They told us no safeguarding concerns about people had been reported to them since our last inspection.

Systems were in place to identify and reduce risks to people using the service. The provider continued to assess, monitor and put in place plans to reduce risks of injury or harm to people posed by their healthcare conditions and needs. This information was current, so staff had up to date guidance about the support they should provide to keep people safe. The registered manager, who was one of the staff member's that regularly supported people, demonstrated a good understanding of the support the people needed to promote their independence and freedom, yet minimise any identified risks.

There were sufficient numbers of staff to support people. We did not look at recruitment processes in depth at this inspection. This was because the registered manager told us no new staff had been employed since our last inspection at which time we found the service had robust processes for ensuring only suitable staff were recruited.

Where staff were responsible for this, they supported people to take their prescribed medicines. Staff had received training in medicines administration. People's records showed staff recorded what medicines people were given and when. The registered manager undertook a monthly medicines audit to assure themselves medicines were managed safely and appropriately, and that staff remained competent to administer these.

Staff had access to supplies of personal protective equipment (PPE) to help them reduce the risk of spreading and contaminating people with infectious diseases. The provider ensured that staff continued to be reminded, for example through staff meetings, of the importance of following safe working practices in relation to infection control. Staff had also received training in food safety so that they were aware of the procedures that needed to be followed when preparing and storing food. This helped to reduce the risk of people acquiring food related infections that could lead to illnesses.

Is the service effective?

Our findings

The provider had systems in place to assess and plan support for people in line with current legislation, standards and evidence-based guidance to help people achieve effective outcomes. The information obtained by the provider from people's assessment of needs was used to develop an individualised support plan so that staff had relevant and current information about the care and support they required.

Since our last inspection, staff continued to receive relevant training to help them meet people's needs. Staff were also supported to continuously improve in their role to help them provide effective support to people. They had group supervision and monthly staff meetings with the registered manager to discuss their working practices, issues or concerns they had about their work and any training or learning they needed to support them in their role.

Where people required help from staff with their meals, their support plan set out their preferences for this so that staff provided them with the food and drink of their choice. Staff recorded what they had prepared and provided at mealtimes. They also maintained records detailing the support provided to people at each visit. This information helped everyone involved in people's care and support, check that they were eating and drinking enough to meet their needs and receiving the support they required. Staff reported any concerns they had about people, promptly, to the relevant persons and/or healthcare professionals so that appropriate support could be sought for them. We saw a good example of this for one person where the registered manager had noted there were long gaps between scheduled visits that increased risks to the person in terms of their safety. The registered manager liaised with the person's relatives and an additional visit was added each day which helped to reduce these risks.

The provider worked closely with other healthcare professionals to ensure a joined-up approach to the support people received. The provider told us a lot of the support provided by staff since our last inspection had been to people who were at the end of their life and being cared for and nursed at home. Staff worked closely with district nurses and staff from the local hospice to ensure that people experienced, comfortable and dignified care in these instances.

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 with appropriate legal authority. Any application to do so must be made to the Court of Protection.

We checked whether the service was working within the principles of the MCA. Staff continued to adhere to the principles of the MCA. Systems were in place to assess people's capacity to make and consent to decisions about specific aspects of their care and support. There were processes in place where if people lacked capacity to make specific decisions about their care and support the service would involve people's, representatives and healthcare professionals, to ensure decisions would be made in people's best interests.

Is the service caring?

Our findings

We received positive feedback about staff from people's relatives. One relative said, "They are like family. They are so good to all our family and very helpful...they are very friendly, down to earth and take feedback really well and don't get upset." Another relative told us, "[Registered manager] is a delight. He's absolutely brilliant. He's very empathetic and really understands my [family member] and what they need. He's developed a good rapport with [family member]. The job gets done brilliantly."

A relative of a person that had been supported at the end of their life recently wrote to the service to praise staff for the care provided to their loved one. They commented, "You really do care...not only did you give [relative] the care that she needed but you treated her with kindness, dignity and respect. You also gave her your time by talking to her and listening to her. You made her smile and we thank you for that."

Recent feedback the provider had received from people, through 'customer satisfaction questionnaires' and spot check visits, indicated people were satisfied with the support provided by staff. People did not indicate any concerns about staff's conduct or the quality of care provided by staff. People rated staff highly for their courteousness and for treating them with dignity and respect.

People using the service received care from the same core group of staff during weekdays and at weekends. This helped to ensure continuity and consistency in the support they received. This was important as this helped people become familiar with staff so that they were comfortable receiving support from them.

The registered manager, who was one of the staff member's that regularly supported people, told us the various ways they ensured people's privacy and dignity particularly when they were being supported with aspects of their personal care. For example, they said they asked people for their permission before being provided with support, offered choice and gave people the space and time they needed to do things at their own pace. This demonstrated staff were sensitive to people's needs and discreet when providing care and support.

People were supported to be as independent as they could be. A relative told us, "[Family member] has always been independent and [registered manager] recognises this and promotes this wherever possible." People's support plans set out their level of dependency and the specific support they needed with tasks they could not undertake without help, such as getting washed and dressed. Staff were encouraged to prompt people to do as much for themselves as they could to help them to retain control and independence over their lives.

Is the service responsive?

Our findings

Since our last inspection, people continued to receive care and support that was tailored to their needs. People and their representatives contributed to the planning of their care and support package. This helped to ensure that their decisions and choices informed the care and support provided by staff. People's records contained current information about the support they needed from staff with their personal care needs, their dietary needs and their physical and psychological health needs. Their support plan set out how and when this support should be provided by staff. A copy of this plan was placed in a file in people's homes so that staff supporting them had easy access to this. The registered manager, who was one of the staff member's that regularly supported people, knew people well and understood their needs, preferences and choices.

Records maintained by staff indicated the support they had provided reflected what had been agreed and planned for the person. This included respecting the person's choices and decisions about how support was provided to them. Where this was appropriate, the registered manager reviewed the support provided to people to ensure this was continuing to meet people's needs.

The registered manager used spot check visits and 'customer satisfaction questionnaires,' to check that people received timely and responsive support from staff. People's feedback obtained through these checks did not indicate any concerns about staff turning up late for, or missing, scheduled visits.

Relatives had no concerns about the support provided to people. One relative said, "It's going really well. We have no issues." Another relative told us, "They are one of the best companies we've had." The provider continued to maintain arrangements to deal with any complaints about the service if these should arise. Information about how to make a complaint had been provided to people. This set out how any complaint they made would be dealt with and by whom. The registered manager also used spot check visits to check that people knew how to complain if they had any concerns. The registered manager confirmed there had been no formal complaints made by people about the service since our last inspection.

Is the service well-led?

Our findings

The service continued to have a registered manager in post. A registered manager is a person who has registered with CQC to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run. The registered manager was aware of their registration responsibilities and submitted statutory notifications, as required, about key events that occurred at the service. This was important as we needed to check that the provider took appropriate action to ensure people's safety and welfare in these instances.

We received positive feedback about the registered manager from people's relatives. They told us the registered manager was accessible, supportive and responsive to their needs. One relative said, "[Registered manager] is very attentive and thoughtful and this shows in the way that he handles people." Another relative told us, "[Registered manager] is really helpful and supportive."

The registered manager checked that staff were continuing to contribute to the achievement of the service's values and aims. Staff meetings were used to encourage staff to demonstrate how the support they provided improved the quality of people's lives. This helped the provider check all staff were actively contributing to the achievement of the service's values and aims.

The provider had systems in place to monitor and review the quality of service that people experienced. They used 'customer satisfaction questionnaires' and spot check visits on staff to obtain and review people's feedback about the quality of support provided to them. The registered manager also undertook audits of key aspects of the service at regular intervals to check staff were adhering to required standards relating to: their conduct and to the delivery of care, infection control procedures, record keeping and medicines administration.

Records relating to people, staff and to the management of the service were accurate and up to date. The registered manager also regularly reviewed the service's policies and procedures and ensured all staff were informed when these changed so they could update their knowledge and understanding of these.

The provider worked in partnership with other agencies to develop and improve the delivery of care to people. For example, the registered manager was in regular contact with local authorities and organisations funding people's care, so they were kept up to date and well informed about people's care and support needs. This helped to ensure people continued to receive the appropriate care and support they required. The registered manager also told us they had been building relationships with local authority commissioning teams to raise the profile of the service and in this way hoped to grow the business further.