

Bell View Help at Home Limited

# Bell View Help at Home Ltd

## Inspection report

33 West Street  
Belford  
Northumberland  
NE70 7QB

Tel: 01668219538

Date of inspection visit:  
19 June 2023

Date of publication:  
21 July 2023

### Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service well-led?

Good ●

# Summary of findings

## Overall summary

### About the service

Bell View Help at Home is a domiciliary care agency providing personal care to people in their own homes. At the time of our inspection there were 103 people using the service. There were 88 people in receipt 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.

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

At the time of the inspection, the location did not care for or support anyone whose primary support need was their learning disability or an autistic person. However, we assessed the care provision under Right Support, Right Care, Right Culture, as it is registered as a specialist service for this population group. Right Support: 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.

Staff supported people to make decisions following best practice in decision-making. People's relatives helped people express their needs and wishes if they could not do so themselves. Multidisciplinary healthcare teams were involved in decisions about people's health when needed.

Staff knew people well, and provided person-centred care. Care documentation included clear guidance on how to care for people.

Medicines were managed safely. Some records were not in line with best practice guidance but action was taken immediately to rectify this.

Right Care: Staff understood how to protect people from poor care and abuse. The service worked with other agencies when needed to provide the most appropriate care. Staff had training on how to recognise and report abuse.

Risks to people were assessed and regularly reviewed when people's needs changed. The service had enough appropriately skilled staff to meet people's needs and keep them safe.

Right Culture: There was a positive culture in the service. Staff said the management team were supportive. Managers held regular supervisions with staff. Staff worked effectively with visiting professionals.

People, their relatives and healthcare professionals were involved in planning their care.

Quality assurance and monitoring systems were in place and effective. The registered manager was continuously improving the service. Lessons had been learnt from incidents.

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

The last rating for this service was good (published 4 May 2018).

#### Why we inspected

This inspection was prompted by a review of the information we held about this service, and the length of time since the last 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.

# Bell View Help at Home 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 Health and Social Care Act 2008.

#### Inspection team

The inspection team consisted of an inspector and 2 Experts by Experience. 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 notice to the service of the inspection. This was because it is a small service and we needed to be sure that a member of the management team would be in the office to support the inspection.

Inspection activity started on 19 June 2023 and ended on 28 June 2023. We visited the location's office on 19 June 2023.

#### What we did before the inspection

We reviewed information we had received about the service. We contacted the local authority

commissioning team for their feedback about the service. 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 used all this information to plan our inspection.

During the inspection

We spoke with 9 people and 10 relatives about their experience of the care provided. We contacted 7 care staff by email. We spoke to the registered manager, chief executive officer, and two area coordinators. We spoke to 3 healthcare professionals who work with the service regularly.

We reviewed a range of records. This included 7 people's care records and 4 medicine records. We looked at 3 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.

# 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.

### Using medicines safely

- Medicines were managed safely. Medicine records clearly detailed what medicines people needed to take and when they needed to take them.
- Medicines audits were carried out regularly. When issues were identified they were acted upon in a timely manner.
- 'When required' medicines records were generic which it is not in line with best practice guidance. We raised this with the registered manager who updated the documents during the inspection.

### Systems and processes to safeguard people from the risk of abuse; Learning lessons when things go wrong

- People were safe. The provider had policies in place to help keep people safe from abuse. One relative said, "I do feel that [person] is safe with the carers, they are all so good "
- Safeguarding concerns were recorded, reported and investigated appropriately. Staff and managers were confident in their knowledge of safeguarding procedures. The safeguarding policy was accessible to all staff. Staff had completed safeguarding training.
- Lessons had been learnt when things went wrong. Actions had been taken to reduce the risk of a reoccurrence. Managers shared lessons learnt in team meetings or supervisions with staff.

### Assessing risk, safety monitoring and management; Preventing and controlling infection

- Risks were assessed, and actions were put in place to keep people safe. Care plans included information about risks to people and how they should be managed. This included risks around emollient creams and specialist moving and handling equipment.
- Care records included specific information about people's diagnoses to help staff understand their needs fully. For example, one record included details on a specific type of stroke, and another on spinal injuries.
- People were kept safe from the risk of infection. Staff wore appropriate PPE when giving personal care. The management team carried out spot checks on staff to ensure PPE was worn correctly.

### Staffing and recruitment

- There were enough staff to care for people safely. Contingency plans were in place to cover short notice staff absence. People said staff spent the right amount of time with them during visits, although were not always punctual.
- Staff had been recruited safely, in line with best practice guidance. Appropriate documentation was in place including Disclosure and Barring Service (DBS). These checks provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.

- The registered manager held regular supervisions with staff members. A staff member commented, "I do feel supported by Bell View management. Management listen to us as a team and have created a welcoming environment, they are approachable and supportive. The lines of communication are always open, if we have a question or we need direction they give us feedback and always keep us informed by regular Emails of any changes to clients care."

# 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

- The management team had created a positive, supportive culture focused on providing person-centred care. Care records were person-centred and supported people's independence.
- A member of staff said, "We have had a lot of changes over the last 8 months, we have shared ideas and plans to create the best outcomes between us. We work really well together."
- One person said, "This is the best thing that has happened in quite a while. I would not be able to cope on my own without these carers. I cannot fault any of them, they are all absolutely fantastic." A relative said, "These carers are so very caring. They treat [person] so well, nothing is too much for them. They never rush [person], they make [person] their priority."

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

- Staff and management understood their roles well. A relative said, "I feel that I have good communication with the office staff and feel that I can raise any concerns when and if they happen. I would absolutely recommend this company. It is so difficult to get people for care work and these carers all do a fantastic job."
- The provider had appropriate quality monitoring systems and processes in place. The management team carried out audits and acted on the findings to ensure people continued to receive good quality care.
- The registered manager was aware of the requirements under the duty of candour, there had been no incidents reportable under this regulation recently. People and their relatives were kept informed of issues when needed.

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

- The management team engaged with people and staff to gather their views. When people called the office, staff took to opportunity to conduct a survey to gather feedback. This feedback was used to improve the service.
- Care records included detail about people's equality characteristics, which were considered during care planning.

Working in partnership with others

- The staff worked effectively with other healthcare professionals. People were supported to access healthcare services in a timely manner.
- One healthcare professional said, "[Staff] contact me if they have any issues [with people's medicines] and we can discuss and rectify them quickly." Another commented, "If [the staff] can sort a problem out they do so, but equally inform us if there is a problem that needs our attention."