

Blakehill Healthcare Limited

Blakehill Healthcare

Inspection report

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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

Blakehill Healthcare (hereafter referred to as Blakehill) is a domiciliary care agency providing personal care to people in their own homes. The service provides support to older people and people with physical impairments. At the time of our inspection there were 32 people using the 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 positive about their experiences of using the service, they told us they felt safe and got on well with staff. Comments included, "They are very kind and caring", and "I feel very safe with my carers they are very good, they are so kind".

At our last inspection we found a breach of regulation in relation to staff recruitment. At this inspection we found improvements had been made. There was clear evidence of the checks and assessments that had been completed in order to make a robust decision about employment. Some people had support with their medicines, and we saw there was a system in place to document the medicines people received and when they had been administered. Records weren't always clear in relation to topical cream administration and we have made a recommendation to address this.

Staff felt supported and able to approach senior staff if they had any concerns. Staff had formal supervision sessions when they were able to discuss their support and development needs. They were also subject to spot checks, whereby a senior member of staff attended a care call unannounced. If concerns were ever raised about a member of staff, we saw that these were investigated, and steps taken to support them; for example, by providing extra training if needed.

The service was rated as requires improvement under well led at our last inspection. This improved to good at this inspection. We saw the provider had taken account of our previous findings and taken steps to address them. There was a person centred culture where people and their relatives were a part of care planning and their views and opinions taken in to consideration.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk

Rating at last inspection and update

The last rating for this service was requires improvement (published 25 February 2021). The provider completed an action plan after the last inspection to show what they would do and by when to improve.

At this inspection we found improvements had been made and the provider was no longer in breach of regulations.

Why we inspected

The inspection was prompted in part due to concerns received about staffing and recruitment. A decision was made for us to inspect and examine those risks. 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 changed from requires improvement to good based on the findings of this inspection.

We found no evidence during this inspection that people were at risk of harm from this concern.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Blakehill on our website at www.cqc.org.uk.

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.

Blakehill Healthcare

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 was carried out by one inspector and an Expert 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.

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

We gave a short period notice of the inspection in order to ensure that someone would be available 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 reviewed notifications. Notifications are information about incidents and events the provider is required to tell us about by law.

We used all this information to plan our inspection.

During the inspection

We spoke with three members of staff and the registered manager. We checked records relating to recruitment of staff and care records for people using the service. We checked other records relating to the running of the service such as audits, spot checks and supervision records.

After the inspection

We spoke with six people using the service and four family members. We gained feedback from one further member of staff.

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 requires improvement. At this inspection the rating has changed to good. This meant people were safe and protected from avoidable harm.

Staffing and recruitment

At our last inspection the provider had not ensured recruitment practices were robust enough to ensure that staff employed by the service were safe and suitable. This was a breach of regulation 19 of The Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 19.

- There were robust processes in place to ensure staff were suitable for the role. We saw that references were sought from previous employers, even when these employers were based abroad. Disclosure and Barring Service (DBS) checks were completed, A DBS check highlights whether a person has any convictions or is barred from working with vulnerable adults. There was a clear audit process to show how a person had been assessed and the decision reached to offer them employment.
- There were sufficient staff to meet the needs of people's care packages. There were no significant issues reported with staff arriving late or missing calls. When staff running late was unavoidable, someone from the office would let people know. People told us, "They come on time, the office calls if they are running a little late" and "They are on time most of the time".
- Staff confirmed they were given sufficient time to travel between calls and weren't pressured to work more hours than they wanted to.

Systems and processes to safeguard people from the risk of abuse

- People felt safe; they and their relatives told us, "I feel very safe with my carers they are very good", "We feel safe, they are very respectful", and "All safe and above board".
- Staff received training in safeguarding. The agency had recently worked with the local authority to ensure the training was of a good standard and provided staff with the knowledge they required.
- Staff confirmed they had attended training and felt confident about reporting any concerns. We noted that as part of recruitment, applicants were asked questions that assessed their understanding of how to ensure people were safe.

Assessing risk, safety monitoring and management

- People and their relatives told us staff had access to care plans and took note of these before commencing care. Comments included, "My husband has a Zimmer frame, they walk behind him to keep him safe", "I do have a care plan and the staff follow it", and "I think the staff are trained, they always look after me well".
- People had individual risk assessments in place. These had clear instructions for staff to follow and

minimise the risk of injury to people. For example, the support people required for mobilising was described and included any equipment they needed, and the number of staff. These were reviewed and updated regularly.

- We saw that spot checks took place. Spots checks are when a senior member of staff attends a care call unannounced to monitor staff performance. One member of staff commented, "I have had a few unannounced visits and competency visits too for manual handling and practicals".

Using medicines safely

- Some people had support with their medicine and topical creams. One person told us, "They give me my medication, they always make sure I take it".
- There were systems in place to record medicine administration electronically on the care planning system. This created an alert for office based staff, if medicines weren't administered at the time they were scheduled to be given. We noted that topical creams weren't always included on the electronic record and staff weren't always recording in daily notes that these were being applied. We discussed this with the registered manager who said they would address this so that there was a clear audit trail of when creams were being applied by staff.

We recommend that medicine administration records are reviewed to ensure they contain all necessary information.

Preventing and controlling infection

- Staff had access to good supplies of Personal Protective Equipment (PPE) and used this when visiting people in their home and delivering personal care.
- Staff had received training on infection control and understood their role in preventing the spread of infection.

Learning lessons when things go wrong

- People told us they felt able to raise concerns or issues with senior staff. They told us, "I feel the office do all they can to help, they always give me pretty good answers to my questions", and "The office couldn't do anything better".
- We saw clear evidence that if concerns were raised, these were investigated and action taken to ensure the issue didn't happen again. If these was a concern raised about staff performance, we saw they were supported with further training and supervision.
- The provider worked with the local authority to address and resolve concerns and improve the performance of the service.

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 requires improvement. At this inspection the rating has changed to Good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

At our last inspection we recommended the provider reviewed the monitoring and auditing systems to ensure they were fully effective and covered all areas of regulation. The provider had made improvements.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; Continuous learning and improving care

- There was a registered manager in place who was supported by a team of office staff and senior carers.
- There was a programme of audits and checks in place to monitor the service. For example, we saw that infection control was checked as well as PPE. These checks had been effective in identifying issues such as Covid tests that were out of date and needing to be replaced.
- The provider was willing and able to act on concerns raised. Progress had been made since the last inspection in improving the recruitment process and the service was no longer in breach of regulation.
- We saw that accidents and incidents were investigated and audited as a way of ensuring learning took place whenever possible to improve the service.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people; Engaging and involving people using the service, the public and staff, fully considering their equality characteristics.

- There was a high level of satisfaction with the service. People told us, "We are happy with the service. No complaints, we would recommend the service" and "The office couldn't do anything better".
- People had evidently built positive relationships with staff who provided care. They told us, "They (staff) are very respectful, always friendly, always ask if there is anything they can do before they leave", "I am very happy with my care, my husband has them too, very happy", and "In the morning they help shower me and do my breakfast, two or three of them are outstanding".
- Staff were positive about the support they received and told us they felt comfortable asking for support when they needed it. One staff member told us, "I believe I am equipped and have been given good training. Management and seniors are accessible when needed". Another member of staff told us, "I have good support, the registered manager took me through everything".

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

- People felt able to raise concerns and talk with the management team if they needed to. Comments included, "I would say the company is good, they do respond to things. If I had a concern I would definitely call the office" and "So polite all of them. Any little thing and they sort it straight away".

- From records relating to complaints, it was clear that issues were investigated, and the provider communicated with families to ensure they were satisfied with the outcome.

Working in partnership with others

- The provider worked with commissioners and safeguarding teams in the local authority to investigate and respond when issues or concerns arose.