

Tricuro Ltd

# Reablement Care Service

## 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

### About the service

Reablement Care Service is a domiciliary care agency. It provides personal care to people, and works with people to stay or become more independent and confident in their own homes. The service also provides a night care service between the hours of 22.00 and 07.00. Tricuro (the provider) is owned by the Local Authority (BCP & DCC).

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

People felt safe. Staff training, and policies ensured people were safe. Staff knew how to recognise signs of abuse and who to report concerns to.

Risk assessments were in place to ensure people's safety. Staff understood the actions needed to minimise the risk of avoidable harm including the prevention of avoidable infection.

Staff supported people to take medicines safely. Staff were trained in medicines management and knew how to ensure that people received their medicines on time and as they had been prescribed.

People received personalised care which was responsive to their individual needs. Staff had an excellent understanding of the care and support people needed and provided this with great care and understanding.

Care plans were person centred, detailed and explained how people liked personal care provided and what activities they enjoyed.

Staff cared about the well being of people they supported and we received positive feedback from relatives and people about the kindness of staff. People described staff as being 'pleasant, professional and kind' and they were treated with respect.

There continued to be a range of checks in place to ensure people and staffs' safety. Staff were well supported through training and supervision.

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.

The providers values of empowering, trustworthy, welcoming, innovative and inclusive were embedded in the culture of the service and reflected in all areas of the service, especially from the staff and feedback from people.

The service actively promoted assistive technology to help people to remain independent and safe.

The registered manager continually reviewed the service and sought ways to improve in order to benefit both the people receiving the service and staff. They had built strong relationships with relevant professionals and within the local community to promote learning and to meet people's needs.

People had access to healthcare services and were involved in decisions about their care wellbeing. Partnerships with other agencies and health professionals enabled effective outcomes for people.

People received personalised care which was responsive to their individual needs. Staff had an excellent understanding of the care and support people needed and provided this with great care and understanding.

The registered manager was readily available to people, relatives and staff. They had an open and honest approach to complaints.

Governance systems and oversight of the service were robust. Issues were identified, and actions taken to address any shortfalls.

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 31 March 2017).

The overall rating for the service has remained good. This is based on the findings at this inspection.

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 reinspection 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 exceptionally 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 ●

# Reablement Care Service

## 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 team consisted of one inspector and an Expert by experience who made telephone calls to people, their relatives and staff. 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, and works with people to stay or become more independent and confident in their own homes. The service also provides a night care service between the hours of 22.00 and 07.00. Tricuro (the provider) is owned by the Local Authority (BCP & DCC).

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 the registered manager one day notice of the inspection. This was because we needed to be sure the people we needed to talk to would be made aware.

Inspection activity started on 25 September 2019 and ended on 4 October 2019. We visited the office location on 25 and 30 September 2019.

#### What we did before the inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from 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 this information to plan our inspection.

#### During the inspection

We spoke with four people who used the service, three relatives and a close friend of someone who used the service. This was to find out about their experience of the care provided. We spoke with three members of staff including the registered manager.

We reviewed a range of records. This included six people's care records and three staff files in relation to recruitment and staff supervision. We also viewed a variety of records relating to the management of the service, including quality monitoring and complaints and compliments.

#### After the inspection

We requested further information from the registered manager related to the service. This was provided promptly.

# 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

- Staff had a good understanding of safeguarding and whistleblowing procedures and knew how to identify and act on any concerns.
- People and their relatives told us they felt safe with the service. Comments made included, "Yes, because the carers are very good, and my friend has confidence in them." And, "I feel very safe because they [staff] are very professional and lovely carers."
- Staff understood their role in protecting people from abuse and had received training on the safeguarding of adults.
- Staff were knowledgeable about the provider's whistleblowing policy and confident that they would be listened to if they had to raise concerns.
- A member of staff told us, "I feel able to report any concerns and feel well informed about what needs to be reported."
- The registered manager had a good knowledge of safeguarding and had raised issues with the Local Authority when concerns had been identified.

Assessing risk, safety monitoring and management

- Staff understood the actions they needed to take to minimise the risk of avoidable harm.
- Assessments were carried out to identify any risks to people and to the staff supporting them. This included any environmental risks in people's homes and any risks in relation to the care and support needs of the person.
- There was a contingency plan in place in case of events which affected the service running safely such as adverse weather. People's needs had been assessed to identify anyone who was deemed a visit was essential, or whether other support was available to support them in extreme situations.

Staffing and recruitment

- The registered manager confirmed there had not been any changes in the staff recruitment processes since the last inspection, where we found the systems to be safe.
- The relevant checks had been completed before staff worked with people in their homes.
- People were supported by enough staff to meet their needs. Staffing arrangements provided the flexibility to meet people's changing needs whilst ensuring consistent care.
- Everyone told us that carers stayed for the allocated time.

Using medicines safely

- Medicines were managed safely. The majority of people told us they, or their relative managed their

medication. One relative said "Staff prompt my father with his medicines and record this on the MAR." People told us they received their medicines as prescribed.

- Staff were trained in medicines management and knew how to ensure that people received their medicines on time and as they had been prescribed. Their competency to administer medicines was regularly checked.

#### Preventing and controlling infection

- People were protected from the risk of infection because staff were trained in infection control.
- Staff were clear on their responsibilities with regards infection prevention and control.
- Staff had access to supplies of Personal Protective Equipment (PPE) which they wore as appropriate.

#### Learning lessons when things go wrong

- Accidents and near misses were analysed to understand what had happened, identify trends, and help prevent them happening again. There was an open approach to learning when things went wrong.
- Information was shared appropriately with other professionals, people and relatives and advice was sought and shared amongst the staff team.
- Staff confirmed that learning was shared with them at meetings and more urgent things were sent to them electronically.



# 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 their needs assessed before they started with the service. People told us, "On Christmas eve 2018. I remember it well", and, "Dad was discharged from hospital and a care package was set up immediately." The assessment formed the basis of the person's care plan.
- People's outcomes were identified and guidance on how staff met them was recorded.
- Staff told us they received training and regular updates on changes to guidance or the law. This ensured they were providing best practice and effective care and support to people.

Staff support: induction, training, skills and experience

- People told us they felt their needs were met by staff with the right knowledge, skills, experience, attitudes and behaviours for their roles. Comments received included "I can't fault them", and, "My husband has improved so much", and, "I can see a great difference in my mums abilities now".
- Staff told us they received training that was effective and felt sufficiently skilled to carry out their roles.
- Staff knew people and their needs well and were skilled in caring for people. Competency was checked through regular spot checks. Records showed staff were up to date with training.
- Staff were supported through regular supervision and appraisals with opportunities to discuss any concerns, how best to meet people's needs, and their own personal development.
- New staff had an induction and were expected to attain the Care Certificate if they did not have qualifications and experience in care work. The Care Certificate represents a nationally accepted set of standards for workers in health and social care. Staff told us their induction training had given them the necessary skills they needed to carry out their role.

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

- Some people had support from staff in preparing food and drink as well as assistance with eating and drinking. Care plans reflected the support people needed. Comments made included, "carers prepare my breakfast, lunch and evening meal", and "they [staff] provide mum with her breakfast, we do the rest", and "I do this myself."
- Where people had support to eat and drink, their likes and dislikes had been considered.

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

- Care plans addressed any support people needed to manage their health.
- The service was proactive about referring to health professionals if there were any concerns about

people's health. One person told us the service organised for a physiotherapist to visit the person in their home and said, "A physio came and explained everything to us and provided special equipment for my friend." The registered manager said Tricuro had employed a lead Occupational Therapist (OT), who worked with people receiving Reablement Care Services and at Coastal Lodge (a local rehabilitation unit). Staff told us they worked closely with the OT who was 'readily available to assess and give advice.'

- The service provided a night care service which involved two staff visiting people between the hours of 22:00 and 07:00. This could be to support a person with their continence needs for example.
- Staff spoke knowledgeably about people's health needs and recognised the importance of being proactive in seeking guidance and support from health professionals. The service had sought advice and training from district nurses regarding skin care.
- The service purchased a lifting cushion which was used when people had fallen. This helped them raise up from the floor if they had no apparent injuries and had sufficient upper body strength. This has had a reduction in calling an ambulance crew to help people who are not injured to get up from the floor.

#### 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.

- The registered manager had a good understanding of the MCA. Staff had received training, records were complete, and staff told us the key principles of the act.
- Staff knew about people's individual capacity to make decisions and understood their responsibilities for supporting people to make their own decisions.
- People told us they were encouraged to make decisions for themselves and felt involved in making choices wherever possible.
- People had signed their care records to show that they consented to the care and support they were being provided with.

# 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 improved to outstanding. This meant people were truly respected and valued as individuals; and empowered as partners in their care in an exceptional service.

Ensuring people are well treated and supported; respecting equality and diversity

- Everyone we spoke with described the staff as being 'very kind', 'caring', 'professional', 'gentle' and 'superb'. One relative told us "They [staff] are most sensitive and understanding towards my husband." One person stated they were 'always treated with dignity and respect' and described the service as a 'Godsend.' Another relative described having "peace of mind knowing mum is so well looked after."
- Staff had developed positive relationships with people and spoke about people in ways that demonstrated they cared for them.
- People's cultural and spiritual needs were respected. People were asked about their beliefs and practices during their assessment, these were recorded in their care plans.
- Staff received training in equality and diversity. Staff told us they would care for anyone regardless of their background or beliefs.
- People received highly personalised and compassionate care that took into account their rights to equality and acknowledged diversity.
- The service had created a person centred, caring and kind culture.
- A member of staff told us, "This is the best agency I've worked for. The staff are very friendly, caring and put the people we support first."
- People told us that staff saw them as individuals and provided very personalised care. They said that staff understood their preferences and had knowledge of their lives, families and other things which were important to them. A member of staff said, "We do our utmost to enable people to remain independent, in their own homes as they wish."

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

- People told us they felt included in how their care and support was planned and delivered and had opportunities to provide feedback to the service. One person said "Oh yes and carers go along with what is written in the care plan." Another person told us, "I tell them how I want things to be done." A relative said staff, "Ask if he needs anything else doing."
- Staff told us it was important for them to support people with choices. Records showed they supported people with choices for different aspects of their care. An example was where staff offered people a different choice of meals or the preferred gender of the staff who provided their care.
- People were able to express their needs and choices and staff understood their way of communicating.
- People were encouraged to express their views and the service took time to ensure that people had this

opportunity. Everyone we spoke with said that they were empowered to make decisions about their care.

- People said they felt staff listened to them and were friendly.

Respecting and promoting people's privacy, dignity and independence

- People and relatives confirmed that staff were respectful of their privacy, dignity and independence.
- Staff treated people with dignity and respect and received training in dignity. Comments made included, "We honestly can't fault them" and, "They [staff] make me feel very comfortable when they visit." One told us they had different staff which they didn't like, we raised this with the registered manager who explained due to the nature of the service providing reablement support, staff need to assess people's abilities at different times of the day, during different tasks which is explained during the assessment process.
- Staff understood the importance of supporting people to do as much as they could for themselves, which has resulted in people no longer needing the reablement service. Some people chose to pay privately to continue to use the service. One person said, "My quality of life has improved, not just from the staff input, but from the social support I've received." Another person said, "The staff have given me confidence to get my life back on track."
- Regular spot checks on staff considered how they respected and promoted dignity, such as closing curtains when providing personal care.
- People's personal information was kept secure and staff understood the importance of maintaining secure documents and care records to ensure people's confidentiality was maintained.
- The service actively promoted assistive technology to help people to remain independent and safe. This included reminders when to take their medication which has resulted in people managing their own medicines. An alarm system that reacts when a person falls, rather than relying on the person pressing a button/pulling a cord to request assistance. Staff had supported people to be confident in purchasing their grocery shopping online.

## 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

- People received personalised care that was responsive to their needs. Care plans were detailed and involved the person. Comments made included, "Yes and if I needed more I would ask for it," and, "Absolutely yes" and, "My husband definitely does."
- Staff told us the information they had about people's enabled them to provide the level of care and support the person needed.
- People and their relatives were involved in their care. Peoples opinions varied as to whether their care had been reviewed or not. Comments made included, "No I haven't had a care plan review since I received visits 7 months ago" and, "A review, not that I am aware of for my friend," and, "Yes we had a review of mums care plan in January due to going private" and, "The agency has definitely visited dad to speak to him about his care plan."
- The registered manager explained due to the nature of the service providing reablement support, people usually tend to recover and become independent within a short period of time. People's care and support needs were reviewed very frequently and adapted accordingly. This may have occurred without the need for any formal 'review'. Where people chose to pay for the service on a longer term basis, reviews were formal and occurred on a regular basis or as people's needs changed.
- The majority of people described having regular staff who arrived when they expected them.

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.

- Each person had a communication care plan which detailed how they wished or needed to communicate.
- Records showed people's communication needs had been assessed and were known to staff.

Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities that are socially and culturally relevant to them

- People were encouraged to pursue interests and participate in the local community, where this formed part of their contract with the service. This included informing people about what was available in the community, such as mobile library, day centres and staff supported people to attend a specialist hairdresser, so they could have the style they wanted. Staff supported a person to install a music application on their mobile phone, as music was important to the person and helped them to cope in social situations.

#### Improving care quality in response to complaints or concerns

- Everyone we spoke with knew how to make a complaint and the service had a policy and procedure in place.
- The service had a record of complaints which showed the registered manager had resolved issues to people's satisfaction.

#### End of life care and support

- During the inspection the service was not supporting anyone who was anticipated to be close to the end of their life. We saw several 'thank you' cards and letters from relatives after the service had supported their loved one through their final days.
- People's assessments and care plans reflected their preferences for end of life care.
- Staff said they had received training in end of life care, which would be refreshed if someone using the service was nearing the end of their life.

# 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

- The service had created a highly personalised and compassionate, caring culture not just for the people it looked after but also for the staff. Numerous people and relatives gave us examples of the positive impact the service had on people's lives. Comments received included; "Very experienced", "Excellent", "Very thoughtful", "Very approachable", and, "Very understanding and patient even when I am having a bad day."
- The registered manager and all of the staff were highly motivated to provide the best possible person-centred care and support. A member of staff told us, "This is one of the best agencies I've worked for so far. The staff are very friendly, caring and always putting the people we support first."
- The registered manager nominated the team for a provider award for 'outstanding performance and commitment.'
- There was a clear, positive and open culture amongst the management team and the care staff.
- All staff said that it had been made clear to them what their roles and responsibilities were.
- People and staff told us that the registered manager and other senior staff were all very approachable and that they would have no hesitation in raising concerns or making suggestions.
- The service had produced an information booklet which had details of local support groups, such as for people living with dementia, Parkinson's disease, Age concern to name a few. As well as other provisions such as meal delivery, hospital transport and advocacy support. People said this had been useful for them to access support and advice in their community.

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 promoted the ethos of openness and learning from mistakes. This reflected the requirements of the duty of candour. The duty of candour is a legal obligation to act in an open and transparent way in relation to care and treatment.
- The registered manager showed us accident and incident reporting processes that included prompts for appropriate reporting to other agencies such as safeguarding, health and health and safety executive.

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

- The registered manager and staff were clear about their roles and responsibilities and felt very well supported by, and positive about, the registered provider.
- Staff told us they felt valued and received praise for their work by way of a formal thank you letter. They

said this motivated them to provide the best care they could. A member of staff told us, "They value the staff which is reflected in the way they look after us."

- The registered manager and provider continually monitored the quality of the service people received. There were regular surveys of people, staff and relevant stake holders as well as discussions with people during reviews and unannounced spot checks on staff. This meant they were always checking to ensure that people received the best possible care and support.
- Records of audits, staff meetings, quality assurance and audits showed that when issues were identified, these were shared appropriately, and action was taken to address any shortfalls.
- There were plans in place for unexpected events, this included a Brexit contingency plan

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

- The service had established good working relationships with health and social care professionals'. The registered manager had regular multi-disciplinary team meetings. This enabled them to ensure the best possible outcomes for the people they supported. One healthcare professional said, "Always quick to deal with things and are very good at picking up rapid response (emergency care)."
- The registered manager was involved in numerous initiatives and groups to ensure they remained up to date with care practice matters and to promote the social care industry. These included membership of Dorset Home Care Providers Association (DHCPA), attending Partners in Care registered manager learning hub meetings, networking with other registered managers within Tricuro.
- Staff had training in equality and diversity and described how they would respect and promote people's rights and differences.
- People's opinions about the service was sought in many ways, such as regular telephone calls, reviews and during staff spot checks. Feedback was positive and shared with staff where appropriate.
- There were several opportunities for information to be shared with staff. This included meetings during week days to handover information about people's progress. Regular staff meetings and weekly senior meetings. These ensured information was shared and expected standards were clear. Staff said they found the meetings useful and minutes were available for them if they were not able to attend.
- All staff said that they felt well supported by the management and were encouraged to get in touch in the event of any problems.



