

Pebble Healthcare Limited

# Pebble Healthcare

## Inspection report

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### Ratings

Overall rating for this service

Outstanding 

Is the service safe?

Good 

Is the service effective?

Good 

Is the service caring?

Outstanding 

Is the service responsive?

Outstanding 

Is the service well-led?

Good 

# Summary of findings

## Overall summary

### About the service

Pebble Healthcare is a domiciliary care agency, based in Carnforth, providing personal care to people in their own homes in north Lancashire and Cumbria.

Not everyone who used the service received personal care. The Care Quality Commission (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 17 people were receiving personal care.

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

People received exceptionally compassionate care from committed and caring staff. People achieved better outcomes as a result of the care they received.

People were supported above and beyond to pursue their aspirations and to achieve a quality of life beyond their expectations. Staff supported people in very person-centred ways to identify their goals and wishes and to fulfill them.

People told us they felt safe as a result of the care they received from staff. Staff had a good understanding of people's needs and wishes. Risks had been managed in positive way to support people to maintain maximum independence and control.

Staff had been recruited safely and received appropriate training and information about people's needs which helped ensure they could support people effectively. People praised the staff, who they found to be punctual, knowledgeable and skilled.

The management team and staff were kind, caring and respectful. People praised how kind the staff and management team were. The provider used a system to match people supported with staff which helped ensure compatibility and consistency.

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 service was well managed by a skilled and dedicated management team. People praised the approachability of the managers and could not fault the service.

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 19 April 2019 and this is the first inspection.

#### Why we inspected

This was the first inspection for this service which registered on 19 April 2019.

We undertook this inspection at the same time as CQC inspected a range of urgent and emergency care services in Lancashire. To understand the experience of social care providers and people who use social care services, we asked a range of questions in relation to accessing urgent and emergency care. The responses we received have been used to inform and support system wide feedback

#### 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?

Good ●

The service was safe.

Details are in our safe findings below.

### Is the service effective?

Good ●

The service was effective.

Details are in our effective findings below.

### Is the service caring?

Outstanding ☆

The service was exceptionally caring.

Details are in our caring findings below.

### Is the service responsive?

Outstanding ☆

The service was exceptionally responsive.

Details are in our responsive findings below.

### Is the service well-led?

Good ●

The service was well-led.

Details are in our well-led findings below.

# Pebble 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 Care Act 2014.

#### Inspection team

The inspection was completed by one inspector.

#### Service and service type

This service is a domiciliary care agency, providing personal care to people living in their own homes.

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. At the time of this inspection the registered manager was on extended leave. The service was being managed by one of the directors.

#### Notice of inspection

We gave the service 24 hours' notice of the inspection. This was because the service is small, and people are often out, and we wanted to be sure there would be people at home to speak with us.

Inspection activity started on 8 March 2022 and ended on 15 March 2022. We visited the office location on 8 March 2022. We continued to review evidence and spoke with people who used the service, or their relatives and staff, on the telephone, over the following few days.

#### What we did before the inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority and 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 two people who received a service and the relatives of three people. We spoke with the director who was covering for the registered manager and four further members of support staff. We reviewed a range of records, this included two people's care records and medicine records. We looked at three staff files in relation to recruitment. A variety of records relating to the management of the service were looked at, these included; quality and audit checks, training records, rotas, team meeting minutes, policies and procedures, feedback from people supported and their relatives.

# 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 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

- The providers policies and procedures helped protect people from the risk of abuse and avoidable harm.
- Staff had received training in relation to identifying and reporting safeguarding concerns.
- People told us they felt safe as a result of the care they received. Comments included; "I feel very safe because staff manage things for me." and "[name] feels safe, I would be able to tell [if they didn't]"

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

- The providers risk assessment and risk management procedures helped to protect people from risks in their daily lives.
- Care records identified clearly the risks a person needed support with and provided guidance for staff on how to support the person safely. Staff told us they found the risk assessments informative. Risk assessments had been reviewed and updated regularly.
- One person told us; "I felt really lucky to have had them, I have felt totally protected myself including during the COVID-19 pandemic."
- The provider had a system in place to analyse incidents and accidents. This helped ensure they were able to learn lessons when things went wrong and avoid reoccurrence. Learning was shared with staff regularly.

### Staffing and recruitment

- The provider had robust recruitment policies and procedures in place. Recruitment records contained pre-employment checks including references and disclosure and barring service (DBS) checks, which helped ensure staff were suitable to work with vulnerable people.
- There were enough staff to support people. People received their visits on time and for the right length of time. Staff told us they had enough time to complete visits fully. The administrators ensured where there had been an unavoidable delay, they had contacted the person to keep them informed.
- People told us they were happy with the times and length of visits. Comments included; "They are very rarely late and never miss visits. If they are going to be late, they will always let me know and rearrange times if necessary." and "They never seem rushed. They stay for the full time of the visit." and "I don't know how they could be any better. They will always ask if we want anything else doing at the end."

### Using medicines safely

- The providers medicines management policies and procedures helped ensure people were supported to manage their medicines safely.
- Medicine records we reviewed were complete and included protocols to guide staff in the administration of 'when required' medicines, such as pain relief or when a person may experience anxiety.
- Staff who had responsibility for administering medicines had received the appropriate training. The

management team checked their competencies regularly.

#### Preventing and controlling infection

- We were assured the providers policies and procedures helped keep people supported and staff safe from the risks associated with the COVID-19 pandemic.
- We were assured that the provider was using personal protective equipment effectively and safely.
- We were assured that the provider was accessing testing for people using the service and staff.

# 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 people's feedback confirmed this.

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

- The providers assessment procedures helped ensure people's needs and wishes had been thoroughly assessed and recorded. Care plans were person centred and reflected people's preferences.
- Staff told us they found people's assessments and care plans were informative and useful. Staff could look at care plans when they needed to. This helped ensure care was effective.

Staff support: induction, training, skills and experience

- Staff training included training identified as mandatory by the provider and bespoke training in relation to people's specific needs and conditions. The provider ensured training was up to date.
- People supported felt confident staff had enough training to support them. Comments included; "The care is very good; they seem to take a lot of pains to train staff properly before staff come on their own. They always know what they need to do." and "I cannot say enough about them. Staff are trained and experienced in how to support me."
- Staff received regular supervision and support from the management team, in line with the providers supervision policies. Staff felt able to seek advice and guidance at any time.

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

- People who needed support to prepare food and to maintain their nutrition had been supported by staff who understood their needs and preferences.
- Care records included, where needed, the details of food and drink consumed.

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

- Care records included details of other professionals and agencies involved in people's lives. Contact details were clear.
- Advice and guidance from other professionals had been included in care plans, staff followed this and participated in reviews which helped ensure care was consistent and effective.
- Where the provider was responsible, people had been supported to maintain optimum health. This included supporting people to attend medical appointments and liaising with medical professionals on people's behalf.

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.

- The provider was compliant with the MCA. At the time of the inspection no-one was subject to a Court of Protection authorisation.
- People's ability to make specific decisions and consent to receive care and support had been assessed and recorded. The provider had been robust in supporting people to be as involved in decision making as they could.
- Staff had received training about the MCA and basic principles of consent. Staff were able to describe how they ensured people consented to receive personal care in sensitive and supportive ways.

# 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 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

- People were supported by exceptionally caring staff who were committed to making efforts above and beyond to ensure people were treated well. During the COVID-19 lockdown, the provider ensured everyone unable to meet with loved ones celebrated their birthday with staff. They bought presents and a cake and took photographs or made video calls to relatives and friends to include them in the celebration.
- The provider made exceptional efforts to ensure staff felt respected and cared for. All staff had paid leave on their birthday in addition to their usual annual leave.
- The provider had the safety and welfare of staff at heart and ensured staff could travel safely to visits, monitoring traffic, providing a four wheel drive vehicle in bad weather and on one occasion supporting staff to change a tyre on their car.
- Comments included; "They are all so caring, nothing is too much trouble for them. " and "All the carers are polite and caring. We have a laugh sometimes. They have a good sense of humour."

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

- Care records included information about the best ways to support people to express their views. Staff understood the importance of involving people in decisions about their care.
- Care records included people's voice and their views about their care. People who received a service praised the staff and the service very highly. Comments included; "You have changed my life. You listened to everything I told you, how I wanted it and why and you have ticked every single box. I cried with happiness." and "I couldn't have got through this without you and your team. You have all gone above and beyond and stepped up to be far more than carers. You have been our friend and family when we were all alone. You will never know how grateful I am for that." A professional who was involved with a person receiving a service said; "I only wish we could duplicate your team over and over again. The change I see in [Name] is unreal and that is all down to the amazing care that the team are providing. [Name] is happier than I have ever known them to be. They told me how valued and listened to they felt." A doctor visiting a person said; ". The way they supported [Name] to understand me and what was happening was superb. They took the lead in communication and ensured that [Name] was always the priority and at the centre of everything. Admirable working style and refreshing to see.

Respecting and promoting people's privacy, dignity and independence

- Staff were exceptionally sensitive to people's needs and respected their dignity. Staff went above and beyond to uphold the dignity of a person who they found had passed away. Staff stayed with the person for several hours until family were able to come and supported the family. The provider arranged for

sponsorship of local football team, important to the person, as a memorial.

- Care records included detailed descriptions about what was important for people in relation to their dignity when receiving personal care. This helped ensure people felt comfortable and their dignity maintained.
- Everyone we asked spoke very highly about how caring the staff and management team were.

# 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 outstanding. This meant services were tailored to meet the needs of individuals and delivered to ensure flexibility, choice and continuity of care.

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

- The provider went to exceptional lengths to ensure people had choice and control in their lives and were supported achieve their wishes and aspirations.
- Staff supported a person, with a complex medical condition, to go abroad on holiday. Staff completed additional training to allow them to support with nursing tasks. Staff worked with an independent physiotherapist to learn how to transfer the person on and off an aeroplane, staff hired equipment abroad in advance to ensure the person had what they needed. There was a full programme of activities which had all been risk assessed. Staff recorded the holiday for the person to be able to remember their trip and held a 'premiere' The person said; "This has been the best holiday of my life. I have never been so happy...I will never be able to thank you enough for making this happen for me." The persons' relative said "you will never truly know what it means to us to see this smile back on their face."
- A person living with dementia gained a lot of comfort and pleasure from their pet dog. Staff developed a support plan for the dog to ensure staff provided consistent care and the dog felt secure. Staff found a dog walker who takes pictures of the walks to share with the person.
- Staff responded to a person living with dementia reminiscing about beauty and spa treatments. The agency bought them a foot spa for Christmas and now support them with regular pedicures, manicures and facials.
- Staff responded again, when a person living with dementia talked about their late sister and how they would meet up for cake and coffee. Staff put together a play list of songs the persons sister had enjoyed and arranged to celebrate their sister's birthday with them, eating cake, playing music and reminiscing.
- Staff supported a person to attend the hen party of one of their friends. Staff dressed the same and participated in order to blend in. The person said "I never thought I would be able to do something like this again. I forgot all about my condition and felt the same as everyone else."

Planning personalised care to ensure people have choice and control and to meet their needs and preferences

- The provider had a very person-centred system in place to match staff skills and qualities with people's needs and preferences. This helped ensure the preferences of people receiving care were met.
- Care records included a lot of information about people's life experiences and interests which helped ensure staff understood what might be important to them.
- Staff were committed to providing bespoke person-centred care which reflected people's needs and wishes. One person told us, "They respond to our wishes and we are happy."
- The providers care planning policies and procedures helped ensure care remained up to date. Regular

reviews had been completed which had involved people and their relatives or representatives. Referrals to other professionals had been made when required.

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

- The provider had a clear complaints procedure in place. People had been given copies of the complaints procedure and were aware how to raise a concern.
- There had been one complaint over 12 months ago which was responded to in line with the providers procedures.
- People we spoke with confirmed they did not have any concerns but if they needed to raise anything at all they would.

#### End of life care and support

- People had been supported to consider their wishes and advanced decisions. These had been recorded in the persons' care records.
- At the time of inspection no-one was in receipt of end of life care.

#### 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 provider had met this standard. Communication plans in care records included a lot of detail about how to support people to best communicate.

# 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

- The provider and management team were committed to achieving good outcomes for the people they supported. Staff praised the values and aims of the management team and were proud to work for the agency. Comments from staff included; "The managers have fantastic values and make everyone feel welcome." and "The managers want people to be cared for and be happy. We are all striving for this."
- The service was well-led by the management team. One person said, "The directors seem to be involved in care as well and their employees respect that."

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 provider and management team understood their obligations under the duty of candour and kept people up to date with any incidents as required.
- Notifications had been made to CQC when required.

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

- The provider ensured care quality and care records had been checked and audited at regular intervals. This helped ensure people received consistent high-quality care.
- Where any issues had been identified by audits, the provider had ensured these had been addressed through an action plan and lessons learned had been considered and recorded. This helped ensure improvements were embedded.
- Staff told us the management team was very clear about the quality of care they expected and led by example working alongside staff at times.
- Spot checks of staffs' practice had been completed by management.

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

- Staff felt managers consulted with them and involved them in regular meetings and consultations. Staff felt valued and appreciated. Comments included; "I feel really valued and appreciated, they (managers) will do anything for us, they work around us." and "We get thanked a lot and little gifts. They sometimes text us to let us know if it might be icy outside."
- People told us they had been consulted with and their views sought. Records evidenced regular

consultations with people who used the service and their relatives.

- The provider worked in partnership with other agencies and supported people to access community-based services and activities.