

Shearsmith & Irvin Limited

# Blossom Home Care Beverley

## 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

Blossom Home Care Beverley is a domiciliary care service providing regulated activity (e.g. personal care) to people in their own homes. The service provides support to people with dementia, younger adults and older adults. At the time of our inspection there were 17 people receiving a regulated activity from 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 received their medicines as prescribed. Staff received regular training relating to medicines.

Staff had some knowledge around the Mental Capacity Act and told us they always asked for consent from people. 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 provided people with good quality, person-centred care and were protected from avoidable harm. The provider had an effective safeguarding procedure to manage safeguarding concerns promptly.

Staff were kind and caring. People and their relatives were happy with the care they received. One person said, "I have been really blessed with finding this agency."

Staff were aware of risks and how to manage them. Staff received regular training and a comprehensive induction. Staff told us they felt supported in their role and received regular supervision.

There were sufficient staff to ensure people received punctual care which was not rushed. Staff promoted people's choices and treated people with respect.

People were asked for their consent by staff and felt involved in their care. Care plans used to guide staff to deliver effective care were detailed and personalised.

Staff were praised for their ability to communicate effectively with people, including those with complex needs.

The provider had systems to ensure staff learnt from accidents or incidents. Staff and management strived to continually improve their practice. People and their relatives were asked for their views and knew how to raise a complaint if they needed to do so.

Overall, the governance systems in place were effective and supported the staff to provide effective care. However, audits relating to medicines could have been more robust. This was discussed with the provider and they told us they would address this immediately.

We expect health and social care providers to guarantee autistic people and people with a learning disability the choices, dignity, independence and good access to local communities that most people take for granted. Right support, right care, right culture is the statutory guidance which supports CQC to make assessments and judgements about services providing support to people with a learning disability and/or autistic people. We considered this guidance as there were people using the service who have a learning disability and or who are autistic.

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 3 October 2021 and this is the first 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 effective?

Good ●

The service was effective.

Details are in our effective findings below.

### Is the service caring?

Good ●

The service was caring.

Details are in our caring findings below.

### Is the service responsive?

Good ●

The service was 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.

# Blossom Home Care Beverley

## **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 completed 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 homes.

#### 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 the service 2 working days' notice of the inspection. This was because it is a small service and we needed to be sure that the provider or registered manager would be in the office to support the inspection.

#### What we did before the inspection

We sought feedback from the local authority and Healthwatch regarding the service. Healthwatch is an independent consumer champion that gathers and represents the views of the public about health and social care services in England.

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 visited the provider's office and reviewed documentation relating to the recruitment of 3 staff. We reviewed care files for 3 people who use the service and looked at the provider's audit systems. We spoke with 8 people who use the service and 5 relatives. We spoke with 6 staff who work for the service, including the registered manager and the nominated individual. The nominated individual is responsible for supervising the management of the service on behalf of the provider.

# 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 of this newly registered service. This key question has been rated good. This meant people were safe and protected from avoidable harm.

### Using medicines safely

- People received their medicines in a safe way.
- Staff were trained in their role to administer medicines and their competencies were assessed before administering medicines unsupervised.

### Systems and processes to safeguard people from the risk of abuse

- People were safe and protected from avoidable harm.
- The provider had established systems to identify and report safeguarding concerns and staff were able to demonstrate when and how they would raise a concern.
- Everyone we spoke with told us they felt safe and protected. One person said, "I am so happy because of the carers and they make me feel safe."

### Assessing risk, safety monitoring and management

- Risks to people were identified and mitigated against appropriately.
- People had detailed risk assessments which considered potential risks and how staff could ensure they minimised these accordingly. These were reviewed and updated regularly.

### Staffing and recruitment

- The service had enough staff to ensure people had punctual care calls. Staff had sufficient time to complete all their tasks without feeling rushed.
- People received their care from a small staff team which meant staff knew the people they were caring for well, their preferences and their families. One person said, "The care is consistent. It is rare if anyone new comes."
- Systems were in place to ensure people were recruited safely and were of suitable character.

### Learning lessons when things go wrong

- The provider had systems in place to share learning where an incident or accident had taken place.
- The registered manager told us they provided feedback to staff during team meetings and on a 1:1 basis in supervision.

# 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.

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 MCA 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.

- Staff we spoke with had some knowledge regarding the MCA and how this was relevant to their work. However, further work was required as staff were not always able to demonstrate the principles of the act and when they would use it. The provider addressed this during the inspection and arranged additional training for the full staff team.
- We spoke with staff who confirmed they promoted choice when supporting people with their care and treatment.
- People's care plans recorded if they had consented to their care as described in their care plans.

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

- There was a holistic approach to assessing, planning and delivering care and support. Staff knew people exceptionally well and supported them to achieve outcomes which far exceeded health professionals' expectations.
- Staff had supported one person to regain their speech, mobility and daily living skills; they described the positive impact this had on the person's ability to maintain important relationships and their quality of life.
- People had detailed and personalised care plans which supported staff to guide staff to deliver care in an effective way. A relative said, "I have full confidence in the staff and what they do. They follow protocol and the care plan, we do not ever worry about what is going on."

Staff support: induction, training, skills and experience

- People gave positive feedback about the effective care and support staff provided. One person said, "I



think the staff have the right skills and the training needed to support me."

- Staff received a comprehensive induction to the service, shadowed more experienced staff and completed a wide range of training to support them to provide effective care.
- Regular supervisions and annual appraisals, alongside observations and 'spot checks' helped management monitor and make sure staff had the skills and experience necessary to provide effective care.

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

- People's preferences about what they liked to eat and drink were recorded in their individual care plans.
- Staff were knowledgeable about people's dietary requirements and preferences. People told us staff used their initiative and creativity when preparing foods to reduce waste and encourage variety.

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

- Staff supported people to access health care services when required. People received timely referrals for support from specialist professionals such as the falls team and occupational therapists.
- Staff knew people well, this meant they were aware of any minor changes in their mood or appearance. This meant people were supported to access healthcare in a preventative and effective way.
- One person was supported by staff to complete appropriate exercises set by other healthcare professionals. Due to the consistency provided, there was a significant improvement in the person's abilities and their mobility improved significantly.

# 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 good. This meant people were supported and treated with dignity and respect; and involved as partners in their care.

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

- People were involved in their care and encouraged to express their views. One person said, "I am comfortable with what the staff are doing, and they always listen to me."
- Staff told us they would make no assumptions about people's care but equally, "We get to know people's quirks and preferences".
- Relatives told us they felt involved in their relative's care. The provider used an online recording system which relatives could have access to and receive real-time updates on their relative's care, where people had consented to this being shared.

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

- Staff treated people well and people spoke highly of the carers. Comments included, "Staff are incredibly sensitive, patient and deliver an incredibly caring service," and "I am comfortable with what the staff are doing, and they always listen to me."
- Staff had made a positive impact on people's lives. People and relatives told us they felt the staff went above and beyond what was expected of them due to their caring nature. For example, one staff member dressed up as Santa for Christmas and visited all people who received care and gave them a Christmas present. A relative said, "It's the little things that matter and they are always willing to go that extra mile".

Respecting and promoting people's privacy, dignity and independence

- People received care in a dignified and respectful way.
- Many relatives were complimentary of the staff and felt they had made a positive impact on their relative's wellbeing. One relative said, "The staff have made their life much better; they have improved [relative]'s life no end. I am happier, they are happier – quite honestly, I feel like the luckiest person in the world to have found them."
- Staff spoke with people in a respectful and kind way. They provided patient and unrushed support to meet people's needs and promote their independence. One staff member said, "Everyone is comfortable and happy, and we would not leave until everything is done."
- The staff had recently organised and supported a person to attend the hairdressers after several years of not being able to. The provider told us this had a positive impact on the person's wellbeing.

# 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 good. 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

- Staff involved people and their relatives in developing care and support plans. They asked people for their views and used this information to support them in a way they preferred. One relative said, "The family were involved in the writing of a care plan, there are reviews and we can discuss in between times what we would like changed."
- Staff recorded care at the point of delivery. Care records were uniquely tailored to each person and allowed staff to keep an up to date picture of people's needs.

Meeting people's communication needs

Since 2016 all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard. The Accessible Information Standard tells organisations what they have to do to help ensure people with a disability or sensory loss, and in some circumstances, their carer's, get information in a way they can understand it. It also says that people should get the support they need in relation to communication.

- People had communication care plans which guided staff on how to communicate with them effectively.
- We observed staff interacting with a person who had limited communication in an effective and personalised manner. Due to knowing the person and their communication needs, they were able to engage the person.
- Relatives spoke highly of the staff's ability to communicate with people. Comments included, "[Relative] is not usually very responsive but they make [Person's name]'s life worthwhile." and "Their ability to communicate with [Person's name] is a testament to their patience, focus and undoubtedly dedicated approach to care excellence."

Improving care quality in response to complaints or concerns

- The provider had a complaints system in place. People we spoke with knew how to raise concerns and said they would feel comfortable to do so.
- At the time of our inspection, the provider had not received any complaints or concerns. However, the registered manager was able to demonstrate the process which would be followed should one be received.

# 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.

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

- The provider had systems in place to monitor quality of the service. However, at the time of our inspection, medicines audits were completed remotely and therefore did not provide assurance medicines had been given or stored as prescribed. The provider told us they would address this immediately.
- Staff were clear about their roles and the expectations the provider held.
- People and their relatives had praise for the nominated individual and the values which had been instilled to the staff. Comments included, "They are wonderful and know the things which mean so much, what a caring business owner;" and "The team and the management are a credit to themselves, they have a passion for their job and the company that is seldom seen in this industry if ever."
- One staff member told us they would happily have their relative receive care from Blossom Home Care Beverley due to "knowing what the managers put in place to monitor the quality of care."

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

- Staff provided people with good quality and person-centred care. The registered manager and nominated individual were incredibly passionate and had worked hard to ensure people received a high level of care.
- The values of the service were centred around care and compassion. Staff paid great attention to detail and wanted to achieve better outcomes for people. The service had improved people's lives to the extent they no longer required care and could live independently.
- Both the registered manager and the nominated individual completed shifts themselves to support staff and to lead by example.

Continuous learning and improving care; 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 took every opportunity to improve the care they provided. The registered manager told us the staff would call her when they discovered any minor detail which improved a person's care to ensure it was recorded in their care plan and the information was shared with other staff.
- The management team had a constant dialogue with their staff and gave clear and timely feedback.
- Notifications had been submitted to the Care Quality Commission as required. The registered manager was able to demonstrate their knowledge of their duty of candour.

Engaging and involving people using the service, the public and staff, fully considering their equality

characteristics; Working in partnership with others

- People and their relatives felt engaged and involved in their care. Everyone we spoke to felt they would be able to raise concerns and felt comfortable to do so.
- The management team regularly visited people to ensure they had the opportunity to discuss their care and provide feedback.
- People were given surveys to provide feedback, as were staff. At the time of our inspection, the provider was reviewing this due a poor return received.
- Where people had specialist involvement from health services, staff ensured they followed specific care plans and followed advice provided.