

A & B Healthcare Limited

Bridlington

Inspection report

Bridlington House
Bessingby Industrial Estate, Bessingby Way
Bridlington
YO16 4SJ

Date of inspection visit:
30 January 2020

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18 February 2020

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

A & B Healthcare Limited – Bridlington is a domiciliary care service providing personal care for people who are living with dementia, mental health conditions, physical disability, sensory impairment, older people, younger adults and people with a learning disability and/or autism in their own home. At the time of our inspection 204 people received support from the service.

People's experience of using this service

People were supported by committed and caring staff who felt supported and trusted in their roles. Most people said they received care from consistent staff who attended on time.

Robust recruitment processes were followed. Staff had received training and support to enable them to carry out their role. People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible. The policies and systems in the service supported this practice. People received their medicines on time.

This was a family run business and the staff told us the management team were approachable and they felt part of one big family. The service had invested in new systems to help with oversight, monitoring and responding to any incidents. This system is to be used to help drive forward improvements. There were systems in place to safeguard people from abuse and staff demonstrated an awareness of safety and how to minimise risks. Lessons had been learnt from incidents. The management team were open and honest and looked to improve the quality of care provided.

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

Rating at last inspection

This service was registered with us on 22 February 2019 and this is the first inspection.

Why we inspected

This was a planned inspection based on the date of registration.

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?

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 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 ●

Bridlington

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

One inspector and an Expert by Experience carried out this inspection. 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.

The service had a manager registered with the CQC. 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

This inspection was announced. We gave the service 24 hours' notice of the inspection. This was because we needed to be sure that the provider or manager would be in the office to support the inspection.

Inspection activity started on 30 January 2020 and ended on 6 February 2020. We visited the office location on 30 January 2020.

What we did before the inspection

We reviewed information available to us about this service. This included details about incidents the provider must notify us about, such as abuse. We sought feedback from the local authority. The provider was not asked to complete a provider information return prior to this inspection. This is information we require providers to send us to give some key information about the service, what the service does well and improvements they plan to make. We took this into account when we inspected the service and made the judgements in this report.

During the inspection

We spoke with the registered manager, a director, two care coordinators, the recruitment officer and six care workers. We also spoke with 11 people using the service and 13 relatives. We looked at seven people's care records in full and 10 people records in part. We also looked at medication administration records and a selection of documentation about the management and running of the service. We looked at recruitment information for five members of staff, staff training records and records of complaints.

After the inspection

We received further evidence from the registered manager via email to verify information they told us during the inspection.

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; Staffing and recruitment

- People were safeguarded from the risk of abuse. Staff demonstrated a good awareness of safeguarding procedures; they knew who to inform if they witnessed or had an allegation of abuse reported to them.
- The registered manager knew to liaise with the local authority if necessary.
- People were safe. They told us, "Absolutely, I 100 percent feel safe with my care workers" and "Yes, staff don't rush me at all, I am comfortable and safe with them."
- There were enough staff available to meet people's needs. Some people told us they received a service from the same carers and they were on time. Some people told us this didn't always happen for them. The registered manager said they would address this.
- Checks were in place to ensure staff were recruited safely.

Assessing risk, safety monitoring and management

- Staff understood and recognised potential risks to people. Care plans and risk assessments contained explanations of the control measures for staff to follow to keep people safe.
- Staff understood risks to people and provided support in a pro-active way to reduce them.

Using medicines safely; Learning lessons when things go wrong

- Medicines arrangements were safe and managed appropriately. People confirmed they received their medicines. Comments included, "They make sure I take my medication, as I can forget sometimes."
- Lessons had been learnt following medicines errors. A thorough auditing system had been introduced and staff were supported through ongoing training and observations to ensure competency in medicines administration.
- Accidents and incidents were responded to appropriately. There was a new comprehensive system in place to monitor all incidents and lessons learnt was evidenced.

Preventing and controlling infection

- Good infection control practices were in place. Staff used personal protective equipment to help prevent the spread of infections.

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.

Staff support: induction, training, skills and experience

- People were supported by skilled and competent staff. Staff received appropriate support from management.
- Staff felt supported by the management and office team. They told us they could approach the manager at any time. Staff told us, "One of the best things about working here is the management being approachable. How comfortable it is. We are not scared to come in to the office to ask for things. As soon as we walk through that door you are made welcome."
- A staff induction and training programme was in place. Staff told us they enjoyed their training and found the trainer made it fun and enjoyable. Staff were encouraged to attend additional training to enhance their knowledge and skills.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law; Supporting people to live healthier lives, access healthcare services and support; Staff working with other agencies to provide consistent, effective, timely care

- People's care and support was reviewed and evaluated monthly to ensure they continued to receive support that was current, person centred and in line with best practice guidance.
- Staff worked with guidance and information from health professionals such as dieticians, district nurses, physiotherapists and GPs. This promoted people's well-being and helped staff deliver effective care and support.
- People were supported to access health care professionals as and when needed. Referrals were made to a range of health and social care professionals when required.
- Records of professional's involved was recorded.
- Staff understood people's health needs and knew how to access additional support if this was needed.

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

- Staff supported people to maintain a balanced diet.
- People were protected from risks of poor nutrition and dehydration. This included working with other healthcare professionals.

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 with appropriate legal authority. 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, whether any restrictions on people's liberty had been authorised and whether any conditions on such authorisations were being met.

- Where people did not have capacity to make specific decisions or consent to their care, records showed decisions had been made in people's best interests.
- Staff had a good understanding of the application of the MCA and could describe how they offered choice and sought consent.

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.

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

- People were treated with kindness; they were actively listened to and their choices respected. People told us, "The carers are very good. They are very pleasant and sociable" and "The carers that come are all darlings. They are great company for me."
- Staff were friendly and demonstrated a passion for providing a good quality service. Staff told us, "There is a caring ethos here. I feel that the caring ethos comes from the top as the management are caring" and "All people deserve care and the best quality care we give them."
- Staff demonstrated a good knowledge of people's personalities, diverse needs, and what was important to them.

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

- Staff supported people to make decisions about their care. They knew when people wanted help and support from their relatives. Where needed staff sought external professional help to support decision making for people, such as other health professionals.

Respecting and promoting people's privacy, dignity and independence

- People were treated with compassion, dignity and respect. Staff were able to describe how they promoted people's dignity.
- People's right to privacy was respected. A staff member said, "When delivering care, we always make sure we close curtains and keep doors shut."
- People were supported to remain as independent as possible. Staff could describe how people were encouraged and supported to do things for themselves and this was reflected in care planning.
- Systems were in place to maintain confidentiality and staff understood the importance of this.

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; 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's needs and information on how best to meet their preferences were recorded. One person said, "Staff listened to what we wanted and what we suggested. They took their time to listen to us."
- Staff were knowledgeable about people and had a good understanding of their preferences and interests; this enabled them to provide personalised care. One person told us, "Last time I was in hospital, they did not keep me in, I came home, and the carers adapted my care."
- People regularly engaged in the local community including accessing centres, classes, shopping and local cafés. One person told us, "The carer goes shopping with me and will take me out. We will go for a coffee together. Recently we went to the garden centre together because I can't see well. She came into the toilet with me to show me where everything was. The second time we went it wasn't necessary, so she waited outside. They really adapt to my routine."

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.

- People's communication needs were identified, and reasonable adjustments were made.
- Information in people's care plans supported staff to understand people's forms of communication.

Improving care quality in response to complaints or concerns

- Systems were in place to respond to any complaints.
- People told us they knew how to make complaints. One person told us, "Once I complained about a carer and they don't come here anymore."

End of life care and support

- End of life care planning was not always fully captured in care planning. The registered manager told us this would be incorporated fully into care plans moving forward.
 - Compliments cards had been sent by family members to thank carers for the end of life care provided to their loved ones.

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; Continuous learning and improving care.

- Regular, effective and consistent checks were in place. The management team had responded well to any areas of improvement identified during setting up the service and adapted their systems to drive forward improvements. A new robust system had recently been introduced to help with oversight, monitoring and responding to any concerns.
- We identified clear action plans in place to drive forward and monitor improvement.
- People and staff had confidence in the manager and found them to be approachable. One person told us, "Everything is dealt with professionally and the staff are professional."

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

- The provider demonstrated a commitment to provide person-centred, high-quality care by engaging with everyone using the service and stakeholders.
- People had opportunities to be involved in developing the service. People and their relatives were asked to complete a quality assurance questionnaire. Feedback was summarised, and action was being taken where people made suggestions.
- All staff said management team were approachable and that they felt part of a family. A staff member said, "The best bit about working here is that you feel like you are part of a family, everyone supports you here."
- Staff felt invested in by the management team and encouraged in their roles. One staff member said, "The management have confidence in me and that means a lot. They support me and push me forward. They put a lot of faith in me. It's nice for someone to believe in you like 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 registered manager was open and transparent when dealing with issues and concerns. They understood their responsibility to apologise and give feedback if things went wrong.

Working in partnership with others

- The service worked closely with key organisations and had good links within the local community to ensure good outcomes for people.

