

Bournemouth Rainbow Ltd

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Inspection report

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Ratings

Overall rating for this service	Inspected but not rated
Is the service safe?	Inspected but not rated
Is the service effective?	Inspected but not rated
Is the service caring?	Inspected but not rated
Is the service responsive?	Inspected but not rated
Is the service well-led?	Inspected but not rated

Summary of findings

Overall summary

This was the first inspection of Bournemouth Rainbow Ltd, which was registered in December 2016. This service is a domiciliary care agency. At the time of inspection the agency provided a service to five people with a learning disability in their own home. CQC only inspects the service being received by people provided with the regulated activity 'personal care'; help with tasks related to personal hygiene and eating. At the time of inspection two people were receiving personal care from the agency. We did not rate the service because it was new and we did not have enough evidence to make robust judgements.

There was a registered manager in post. 'A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.'

This inspection was announced and took place on 25 and 26 October 2017. We gave the service 48 hours' notice of the inspection visit because it is small and the manager is often out of the office supporting staff or providing care. We needed to be sure that they would be in.

All the people involved in this inspection were satisfied with the service provided by Bournemouth Rainbow. People complimented the caring nature of the staff and said there was a regular team of workers who knew them and understood to care and support them. People knew in advance which staff would be visiting them and said staff were punctual and had never missed a visit.

Staff received training, which was refreshed at regular intervals, to make sure they had the skills and knowledge required to be able to provide care safely. Their performance was monitored regularly and they were themselves supported through supervision meetings with their line manager.

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

Quality assurance systems were not yet fully developed because the agency was still in its infancy. Staff and people involved in the inspection were positive about the registered manager and his leadership.

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.

People were protected from harm as risks were identified and managed appropriately.

There were sufficient staff with the right skills and knowledge to meet people's needs.

Staff had been recruited in line with legislation and guidance.

Inspected but not rated

Is the service effective?

The service was effective.

People benefited from staff being appropriately trained and supervised.

People choice was respected by their consent being sought from staff. Their rights were protected because staff followed the requirements of the Mental Capacity Act 2005.

Inspected but not rated

Is the service caring?

The service was caring.

People benefited from staff being supportive and respectful.

Inspected but not rated

Is the service responsive?

The service was responsive.

People received the care they needed. Care plans reflected individual needs and were regularly reviewed and updated.

There had been no complaints since the service was registered.

Inspected but not rated

Is the service well-led?

The service was well led.

Quality assurance systems were still being developed.

Inspected but not rated

There was a positive culture where people and staff had confidence in the management.

Bournemouth Rainbow Ltd

Detailed findings

Background to this inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection was planned to check whether the provider was meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

Before the inspection we reviewed the information we held about the service. This included a Provider Information Return (PIR). This is a form that asks the provider to give some key information about the service, what the service does well and improvements they plan to make. We also contacted the local authority commissioners to obtain their views.

One inspector carried out the inspection. The first day was spent in the agency's office when we met with the registered manager and on the second day we spoke with three members of staff, the relative of a service user and a care manager who had arranged a package of care for another service user.

We looked at two people's personal care records. We also looked at records relating to the management of the service such as, staff recruitment, staff supervision files, training records, policies and quality assurance documents.

Is the service safe?

Our findings

Everyone involved in this inspection who we spoke with had no concerns about people's welfare or safety. People made comments such as; "Brilliant; they are an amazing service", and "Really good; they are doing really well".

The registered manager had put the following systems in place to protect people and staff from harm as far as possible.

Staff had been trained in adult safeguarding. The registered manager had contracted with an external training company for this training and ensured that all staff attended safeguarding training. This included knowledge about the types of abuse and how to refer concerns or allegations. Training records confirmed staff had completed safeguarding training and the registered manager had a system to make sure staff received refresher training each year to update their knowledge.

The registered manager assessed the hazards and risks of a person's home environment as part of an initial assessment before a package of care was put in place for people new to the service. Other assessments were completed if the registered manager identified additional risks involved in meeting the person's assessed needs. For example, one person had a detailed moving and handling assessment for their safe use of a hoist that they needed.

The staff team kept records of any accidents or incidents and the registered manager reviewed these. He confirmed that, in the future as the agency grew in size, accidents and incidents would be reviewed monthly to see if there were trends where action could be taken to reduce the likelihood of their happening again.

The registered manager had developed plans for some emergency contingencies such as a situation where staffing could not be provided. In this scenario there was an arrangement to work with another 'care at home' provider. The registered manager agreed that other emergency plans would be developed as the agency grew in size.

The agency employed five part time staff. The staff spoken with and other people involved in the inspection confirmed that people's needs were met through this level of staffing. The registered manager said that he made sure there was capacity within the team before new packages of care were agreed. He told us that he planned to increase the size of the agency but not to become a large provider as he wished to maintain a small personalised service. People involved in the inspection confirmed that visits always took place as agreed and that staff were always punctual.

Recruitment procedures had been followed in the main. Some improvements were discussed with the registered manager and, by the end of the inspection, all the required checks had been carried out and records in place. These included, a photograph of the staff member concerned, proof of their identity, references, a health declaration and a full employment history with gaps explained and reasons given for ceasing employment when working in a care setting. A check had also been made with the Disclosure and

Barring Service to make sure people were suitable to work with people. There was also a system to make sure new members of staff did not start work until all the procedures and record collection had been concluded.

At the time of the inspection the agency was not administering or assisting anyone with medicines.

Is the service effective?

Our findings

People spoke highly of Bournemouth Rainbow Ltd and people were positive about the staff and the effectiveness of the agency. A relative told us; "They have never let me down. All the three staff have been very good".

Before the inspection we sent out quality assurance questionnaires to people who used the service, relatives and members of staff. All returned quality assurance questionnaires were positive stating that; staff arrived on time, stayed for the agreed length of time and completed all of the tasks that they should do during each visit.

Newly recruited staff completed an induction training programme when they started working with the agency. This included a period of work shadowing with experienced staff. Care workers, new to the care industry, had induction training that led to the care certificate, a nationally recognised induction qualification. Staff we spoke with felt they were provided with appropriate training, with one member of staff commenting that the registered manager was very organised with regards to training. The registered manager has a system to make sure staff were kept up to date with their required training.

People were supported by staff who received supervision through one to one meetings with their line manager and an annual appraisal. Staff told us they often worked directly with the registered manager and therefore had direct supervision of their work. One member of staff told us that the registered manager had sometimes exceeded expectations, for example, by dropping off staff who did not have their own transport.

The registered manager had a good understanding of The Mental Capacity Act 2005 (MCA). The MCA provides a legal framework for making particular decisions on behalf of people who may lack the mental capacity to do so themselves. The Act requires that as far as possible people make their own decisions and are helped to do so when needed. The MCA also stipulates that when people lack mental capacity to take particular decisions, any made on their behalf must be in their best interests and the least restrictive as possible. The registered manager discussed an example where they had worked with an occupational therapist to make sure that the least restrictive sling was used when hoisting a person to make them more comfortable. The registered manager also understood decision making where a relative had a lasting power of attorney for health and welfare.

Staff were required to read summary information about the MCA and therefore made aware that people must be supported to make their own decisions as far as possible. It was agreed with the registered manager that staff should be offered more in depth training in MCA.

People were supported with their health care needs and staff worked with healthcare workers to support people. One person had complex needs and staff worked collaboratively alongside district nurses and occupational therapists to support this person.

Is the service caring?

Our findings

People involved in the inspection all said there were good relationships and had confidence in care workers. They also said they were treated with respect and their choice respected.

People had never had a missed visit and they were supported by care workers known to them. The registered manager told us that people could choose the gender of care workers for receiving personal care.

Staff had the right skills to make sure people received appropriate care. Staff had got to know people so that they felt comfortable with them. This ensured that care and support was provided in a way that met with people's wishes and preferences.

Is the service responsive?

Our findings

At the time of this inspection two people had assistance with personal care needs from Bournemouth Rainbow Ltd. The agency was also supporting three other people in the community. Everyone we spoke with involved in the inspection had favourable comments about the support and assistance provided by the agency. People told us the staff fulfilled all the expectations that had been agreed within their care plans.

The registered manager visited people with their care manager to assess their needs before a package of care was agreed and a service set up. This meant that the agency only took on packages of care where they could meet people's needs.

It was agreed with the registered manager that Bournemouth Rainbow would develop more in depth, personalised care plans, as staff had been working with the local authority care plans to support people. Before the draft report was written the registered manager had taken action to develop the agency's own personalised care plans. These were put in place to make sure that staff knew how to fully support people. For example, should a person with epilepsy have a seizure or a person with diabetes present with too low or high blood sugar at a time when staff were providing support.

Bournemouth Rainbow Ltd provided people or relatives with a folder containing a copy of the care plan and other relevant documentation, including information about the agency and how to make a complaint. People told us staff acted consistently and knew people's needs well thus providing a person centred service to people.

People also told us they knew in advance the workers who would be visiting them. Staff we spoke with told us they received their schedules well in advance so that they knew where and with whom they would be working.

People told us that the information about how to complain was clear; however, no one had made a complaint with their preferring to tell us about how satisfied they were with the service they received. The registered manager said that no complaints had been made but a log of all complaints would be maintained, which would be used to seek improvement in the service, should any be received.

Is the service well-led?

Our findings

Staff spoke positively about the registered manager and his leadership. They told us he was organised, thorough and set high standards about expectations of how people should be treated whilst receiving a service from Bournemouth Rainbow Ltd. It was clear there was good morale in the staff team and a positive culture within the agency.

As the service was still early in its development with only five people receiving a service, quality assurance systems had yet to be fully developed. We discussed what systems could be put in place as the agency grew in size. At the time of the inspection, the registered manager had a system of spot checks, usually when he would work alongside care workers, to monitor the standards of care provided. This also provided opportunity to get feedback from people as to their satisfaction with their care.

We discussed with the registered manager significant events that must be notified to the Commission. We use this information to monitor the service and ensure they respond appropriately to keep people safe. No such significant events had occurred since the agency was first registered.