

Bare Hall Quality Carers Limited

# Bare Hall Quality Carers Limited

## 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

Bare Hall Quality Carers is a domiciliary service which provides personal care to people living in their own homes. The service covers Lancaster, Morecambe and surrounding areas.

At our last inspection we rated the service good. At this inspection we found the evidence continued to support the rating of good and there was no evidence or information from our inspection and ongoing monitoring that demonstrated serious risks or concerns. This inspection report is written in a shorter format because our overall rating of the service has not changed since our last inspection.

At this inspection visit we found the service remained good.

Why the service is rated good.

People, relatives and staff all agreed the service was well managed. However, there was a common consensus that communication between staff in the office and staff providing direct care could be improved. We have made a recommendation about this.

Changes had been made to medicines processes to ensure they were in line with good practice guidance. However, these were not yet firmly embedded. We have made a recommendation about this.

Systems, processes and practices continued to be implemented to safeguard people from abuse and risk of harm. Good practice guidance had been followed to keep people safe. People and relatives told us safety was always considered.

Staff told us staffing rotas were planned in advance to allow them to visit the same people. They said this promoted consistency and allowed person centred care to be delivered.

People told us staff were reliable and always worked the allocated time. They said staff were empathetic and motivated to provide compassionate care.

People continued to receive personalised care which was responsive to individual need. Staff had a good understanding of people's individual needs so care could be provided with support which was individual to them.

People received care which was regularly reviewed and support was based around good practice evidence. Staff were supported with continuous learning to ensure they had the correct skills to provide effective care.

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. Consent to care and treatment was actively sought.

The organisation was currently reviewing technology to increase the effectiveness within the service.

The registered provider was responsive in seeking feedback from people and relatives to ensure people were happy with the service provided. We saw complaints were appropriately responded to.

Governance was embedded within the service and was based upon good practice guidance.

Further information is in the detailed findings below.

## 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 remains good.

### Is the service effective?

Good ●

The service remains good.

### Is the service caring?

Good ●

The service remains good.

### Is the service responsive?

Good ●

The service remains good.

### Is the service well-led?

Good ●

The service remains good.

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## **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 is 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.

This comprehensive inspection took place between 14 and 28 January 2019. The inspection was announced. We gave the registered provider 48 hours' notice as we needed to be sure someone would be at the office to assist us with the inspection process. At the time of the inspection visit approximately 200 people were receiving regulated activity from Bare Hall Quality Carers.

The inspection was carried out by an adult social care 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. The expert by experience had knowledge of caring for an older person.

Before the inspection took place, we spoke with the local authority contracts teams, we received no information of concern.

As part of the inspection process we reviewed information held upon our database regarding the service. This included notifications submitted by the registered provider relating to incidents, health and safety and safeguarding concerns which affect the health and wellbeing of people. We used this information provided to inform our inspection plan.

To gather evidence, we carried out two inspection visits at the office. Additionally, we carried out five home visits and carried out telephone interviews with people, relatives and staff to gather further evidence. The registered manager did not select and was unaware who the inspection team contacted by telephone. In total, we spoke with seventeen people who used the service and six relatives to gain their feedback about

what it was like to receive a service from Bare Hall Quality Carers.

Throughout the inspection process we spoke with the registered manager, the operations manager, one member of the management team and eight carers. We looked at the care records of eight people, recruitment records of six staff members and other records relating to the management of the service. This included accident and incident records, quality audit tools and data management systems.

# Is the service safe?

## Our findings

People and relatives told us safety was considered at all times. Feedback included, "I feel very safe, I have a care plan and they look at it when they come, if it's a new person they read it as well." And, "I have no worries I feel very safe with them."

People told us they received their medicines as required. One person said, "They make sure I get my medication on time." Since the last inspection visit the registered provider had reviewed medicines systems and processes and built upon documentation to ensure good practice guidance was underpinned. We saw new Medicines administration records (MAR's) had been introduced to promote good record keeping of medicines administration. We reviewed these to ensure people were receiving the right medicines at the right time. We noted there were some gaps within the MAR records we viewed. The registered manager said this was a documentation error as staff were still getting used to the new system for recording the administration of medicines. We looked at daily records and noted this was the case. Staff had recorded medicines administration in the records but not on the MAR. Staff told us they had received some training to help them work with the new system and said they were also required to complete an annual refresher training course to keep their skills up to date.

We recommend the registered provider consults with good practice guidelines to ensure the administration of medicines is consistently implemented throughout the organisation.

We found systems and processes continued to be embedded to keep people safe. The registered provider was aware of local authority safeguarding guidance and reporting procedures. Staff had been identified and had attended safeguarding champion training so that good practice could be considered and implemented throughout the service to minimise the risk of harm through abuse. Staff told us they received regular safeguarding training and could explain reporting procedures. The registered manager said they were not afraid of challenging poor practice and provided us with examples when action had been taken in line with safeguarding principles.

Processes to ensure safe recruitment of staff continued. The registered provider had a comprehensive recruitment process to ensure pre-employment checks were completed for each applicant to ensure they were suitable for working with vulnerable groups.

Systems were in place to manage risk and ensure people's safety. Since the last inspection visit the registered provider had reviewed documentation and built upon documentation to ensure risk assessments were person centred and individualised for each person who used the service. Risk assessments were in place to manage both individual and environmental risk. Staff said if they identified any new risks, information was passed back to the registered provider so amendments could be made.

People and relatives told us Bare Hall Quality Carers continued to provide a reliable service. Feedback included, "They are always on time and usually stay for the full time allocated." And, "Everything is fine. I have no problems. Staff always turn up." No-one we spoke with had ever experienced any missed visits. One

person told us on one occasion they had been supported by the registered manager when their own allocated staff member could not work. This showed us the service had systems in place to manage unplanned absence. Staff told us they had sufficient time to carry out all tasks. They told us on the whole, they supported the same people on a regular basis which allowed for relationships to be developed and nurtured which promoted continuity of care.

Good practice guidance was followed to ensure infection prevention and control processes were implemented. Staff had access to personal protective equipment (PPE) and we observed staff wearing this.

We saw accidents and incidents were documented and reviewed by the registered provider to ensure lessons could be learned and risk assessments amended to promote safety.



# Is the service effective?

## Our findings

People who used Bare Hall Quality Carers told us they received effective care. We were repeatedly told stability within the staff team enabled staff to be aware of people's individual needs and allowed them to respond in a timely manner. One person said, "They are good, spot on. They know me and what I need." Another person told us staff supported them to maintain their independence whenever possible. They said, "They try and help me be independent, they put things out for me so I can get washed." Care records of people who used the service showed there was consultation with health care professionals as required. The registered manager told us they were in the process of moving to a cloud based care planning scheme which would allow staff to have access to up to date care plans and notes remotely. They said they were confident this technology would enhance the care and support already provided.

People who used the service continued to be supported by a suitably qualified and trained staff team. No one we spoke with had any concerns about the skills of staff. One person said, "I think they have enough training they are very skilled." Since the last inspection visit, the management team had reviewed the training and development programme at the service and had developed new training courses to engage and motivate staff with learning. This included the introduction of a more comprehensive induction system for new staff. Additionally, the service now had an identified in-house trainer responsible for overseeing training within the service. One staff member said, "I have attended one of the new training sessions and found it very informative."

Staff told us they could ask for assistance and advice from more experienced members of staff when required. They told us the management team carried out supervisions and said they could be approached at any time if they had any concerns. We saw evidence of 'on the spot' supervisions taking place with members of the management team observing staff practice to ensure staff were following processes, in line with good practice guidance.

People and relatives told us the service continued to meet peoples' dietary needs. Care plans showed people's preferences and any associated risks related to eating and drinking. Feedback included, "They make my Mum a cup of tea and a sandwich always check she is ok." And, "They always ask me what I want and make me a hot meal." When people had dietary needs, these were clearly recorded within the person's care record so staff could take action. We spoke with one member of staff who was responsible for preparing a meal for a person with specific dietary needs. The staff member had a good understanding of the person's needs and how to meet these.

The registered provider was aware of good practice guidance and had considered this when meeting the health needs of people. For example, we saw good practice guidance in relation to supporting a person who was living with dementia.

The registered provider was working within the principles of the Mental Capacity Act. We discussed the principles of the MCA with the registered provider. They demonstrated a good understanding of the process and how this applied within the service when working with adults who lacked mental capacity. Staff had

received training in this area and were aware of their own personal responsibilities when supporting a person who lacked mental capacity.

## Is the service caring?

### Our findings

Relatives and people who used the service told us staff continued to have a caring manner and kind attitude when supporting people. Feedback included, "If I need anything they always talk to me and if I'm upset they come and sit with me and talk to me." Also, "All staff help me. They are all good. I really like them and they care about me." Also, "They are fantastic girls; polite and well-mannered. They are great with my [relative.]"

We observed examples of staff being kind and compassionate towards people who used the service. We observed one staff member cleaning for a person after they had prepared the person a meal. The person spoke fondly of the member of staff and told us the member of staff understood how important it was to them to have a clean-living space. They thanked the staff member for being so attentive to their needs. We observed staff enquiring about people's welfare and staff responded when people were in need. Staff were patient and did not rush people. One person told us that staff sometimes stayed over their allocated time to ensure all tasks were completed.

People repeatedly told us they valued the relationships that had been developed. A relative said, "Staff have been brilliant. My [relative] looks forward to them coming." We noted there was a light-hearted atmosphere between people and staff. People looked comfortable in the presence of staff and were laughing and joking. One person told us, "They are kind and caring. They come, we have a chat and they make me smile, which is important."

People and relatives told us staff were respectful when staff visited them within their own home. People told us dignity and privacy was considered at all times.

The registered provider understood the importance of ensuring equality and diversity was embedded within the service. Since the last inspection visit the registered provider had reviewed all paperwork used within the service to ensure it did not discriminate individual groups. For example, paperwork now referred to partner rather than wife or husband. The operations director said it was important the service did not make assumptions about people and their beliefs. They said further training was planned to support staff with this subject. This showed us there was a sensitive and caring approach by staff and an awareness of the Equality Act 2010.

We spoke to the registered manager about advocacy. They were aware of the role of advocates and said they would access them when people required support and guidance to make decisions.

## Is the service responsive?

### Our findings

People who used the service and relatives told us they received person centred care. Feedback included, "They always knock and come in, and say hello how are you today is there anything that you need?" And, "I get regular carers, they're really good, do anything I want, they always make sure I'm ok."

We saw care was planned to meet people's individual needs. One person told us they had a preferred carer to support them with certain tasks. They told us on one occasion the management team had responded and changed their rota so they could be supported in line with their needs and by this staff member.

From records viewed, we saw people receiving a service from Bare Hall Quality Carers had a care plan. The registered provider was in the process of updating each person's care plan to ensure all important information was recorded. The operations manager told us it was important all relevant information was documented so effective and responsive care could be provided. People told us they were consulted with when the plan of care was being developed. When people lacked mental capacity, we noted that relatives were consulted with to discuss the agreed plan of care. We saw care plans were signed by the person or their representative which indicated their consent to their care. Care plans were person centred and provided information on the person's individual needs and how staff should support them. People told us they were happy with the care and support they received.

The registered provider looked at ways to make sure people had access to the information they needed in a way they could understand it, to comply with the Accessible Information Standard. The Accessible Information Standard is a framework put in place from August 2016 making it a legal requirement for providers of NHS and publicly funded care to ensure people with a disability or sensory loss can access and understand information they are given. We saw consideration was taken to ensure information was provided in a variety of formats for people to understand and use. For example, people were asked at the pre-admission stage if they would like their care plan in large print, braille or an alternative language.

We spoke with people who used the service and their relatives about complaints. At the time of the inspection visit only one complaint was raised and this was not related to the provision of regulated activity. We received only positive feedback about the staff providing care and support. People and relatives were aware of their right to complain and the process to follow. Feedback included, "If I had any complaints, I would take it to the office." And, "I've never had any complaints or worries they have been brilliant. I couldn't wish for a better set of staff to look after [relative.]"

We looked at how people at the end of their life were supported. The registered manager said they were not currently supporting anyone at the end of life but said if they were to do so they would liaise with the district nursing team for advice and guidance. We saw people's wishes for end of life care had been discussed with people and documented within the care record. This showed us the registered provider understood the importance of ensuring support for people at the end of life was noted so that respectful and individualised support could be provided.

## Is the service well-led?

### Our findings

Fifteen of the seventeen people we spoke with had no concerns about the way in which the service was organised and told us they considered the service well-managed.

Although feedback from people and relatives said Bare Hall Quality Carers continued to be a well-led service, two people and one relative told us they thought communication between the office staff and care staff could be improved. Additionally, five of the eight staff we spoke with told us communication was sometimes lacking. Feedback included, "Communication could sometimes be better. If we get a new client we don't always get the information we need." And, "Sometimes communication doesn't get to us in time. It can take two to three days for us to get the right information." We spoke to the registered manager and the operations director about effective communication. The registered manager told us they were currently reviewing systems within the office and were implementing a new IT system that would give staff live access to care records for people they were supporting.

We recommend the registered provider reviews communication processes to ensure effective communication is consistently achieved.

Staff told us they did not have formal team meetings. One staff member said, "I haven't had a team meeting in seven years." We discussed this with the registered manager. They told us staff were communicated with on a weekly basis when they visited the office for their rotas. They said they were confident with this communication process and said they were readily accessible for guidance and support.

Following the inspection visit carried out in May 2016, there was a change in directors responsible for overseeing Bare Hall Quality Carers. Additionally, a new registered manager was recruited 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.

We spoke with the new members of the management team. The registered manager told us they were proud of the way in which changes had been implemented by the new directors and how stability within the organisation had been maintained. They said the improvements with the paperwork and the new management structure had already begun to benefit people who used the service and staff. Staff confirmed that most changes which had been implemented were having a positive effect upon care delivery. One staff member said, "I think things are changing, things are getting better. The changes I've seen are more positive, they are catered for the client."

The management and staff continued to have a good understanding of the importance of person centred care and how this impacted upon the happiness of people. We saw person-centred care was considered within all aspects of care and support. This had enabled the service to continue being effective; promoting positive outcomes for people using the service.

Oversight of the service continued to be good. The registered manager also delivered hands on care when required to do so to ensure care and support was appropriate to people's needs. We saw evidence of audits taking place to ensure the service being delivered was of a suitable quality and safe. For example, care records had been returned to the office and audited to ensure people had received care in line with their care plan and good practice guidance.

The senior management team also carried out spot checks on staff whilst working to ensure they were working safely in line with good practice and the service's policies.

The registered manager continued to maintain links with other providers including health and social care professionals, community groups and key stakeholders to develop and improve the service. They told us they had good relationships with professionals who could be referred to for advice and guidance. Staff had been identified and had started taking part in champions workshops to gain further skills and knowledge and to share good practice. Additionally, we saw the registered provider was working in association with the police and fire and rescue service to promote independence to allow people to remain safe in their own homes.

People and relatives were actively consulted with. The registered provider had sent out questionnaires to people who used the service and relatives to find out their views about the service provision. This included asking for suggestions where improvements could be made. We reviewed the completed questionnaires and saw feedback about the service was positive. Feedback included, "Always a quick response when I contact office." And, "We look forward to seeing carers." Also, "A splendid company."

The registered manager understood the importance of keeping their skills up to date. They told us they subscribed to several websites to keep their skills and knowledge up to date. Additionally, they attended meetings with other registered managers which allowed them to network and share good practice with other individuals.

The registered manager continued to understand their roles and responsibilities. The registered provider was aware of the need to submit statutory notifications for specific incidents and their responsibilities for ensuring they were compliant with the regulations. We saw the registered provider was meeting their personal responsibility in displaying their ratings assessment.