

Age Concern Bournemouth

Age UK Bournemouth

Inspection report

700 Wimborne Road

Winton

Bournemouth

Dorset

BH9 2EG

Tel: 01202530530

Date of inspection visit:

24 April 2019

08 May 2019

13 May 2019

16 May 2019

17 May 2019

Date of publication:

28 June 2019

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:

Age UK Bournemouth is based in Winton and is registered to provide a foot care service to people in their own homes. This includes simple toe nail cutting, information on foot hygiene and liaison service to the NHS chiropody service.

At the time of our inspection they were providing foot care to 900 people (over a six week period) in their own homes around the Bournemouth, Poole Christchurch, and East Dorset areas.

What life is like for people using this service:

- Met characteristics of Good in all areas;
- Everyone said they had a regular staff member who visited them every six to eight weeks. People described the staff as being "Reliable." "Very good." And "X [staff] does a perfect job, she is clean, uses medical wipes and a protective apron. It's all done correctly"
- People were supported to access health services promptly. Staff knew people well including their communication needs and could identify when a person was feeling unwell, or in pain or upset.
- Recruitment practises continued to be followed.
- Staff knew how to recognise and report abuse and were confident any concerns raised would be responded to by their manager.
- Risk assessments were in place to ensure people's safety.
- There continued to be a range of checks in place to ensure the safety of the service.
- more information is in the full report

Rating at last inspection: Good (The date the last report was published was 19 October 2016).

Why we inspected: This was a planned inspection based on the rating at the last inspection. The service remains Good.

Follow up: Going forward we will continue to monitor this service and plan to inspect in line with our inspection schedule for those services rated as Good. We will continue to monitor the intelligence we receive about the service. If any concerning information is received we may inspect sooner.

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

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.	



Age UK Bournemouth

Detailed findings

Background to this inspection

The 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 checked 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.

Inspection team:

The inspection team consisted of one inspector and three CQC staff from the National Customer Service Centre (NCSC), as the provider agreed to taking part in a CQC pilot for NCSC staff to contact people by telephone for their feedback.

Service and service type:

Age UK Bournemouth is based in Winton and is registered to provide personal care with the Care Quality Commission. The service provides foot care to approximately 900 people who receive the service once in every six to eight week period.

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 maternity leave. Appropriate management arrangements were in place to ensure the home was being managed effectively.

Notice of inspection:

We gave the service 48 hours' notice of the inspection visit. We needed to be sure that people were informed that we would be contacting them by telephone, and we needed a manager to be available to facilitate this inspection.

Inspection site visit activity started 24 April 2019 and ended on 16 May 2019. We visited the office location on 24 April 2019 to see the registered manager. We reviewed people's care records, policies and procedures, records relating to the management of the service, training records and the recruitment records of care workers. We spoke with staff by telephone.

What we did:

Before the inspection we reviewed information we held about the service. This included information about incidents the provider had notified us of and contacting health professionals for their views on the service. The provider had completed a Provider Information Return (PIR). This is a form that asks the provider to give some key information about the service, what it does well and improvements they plan to make.

NCSC staff spoke with 15 people by telephone on the 9 and 10 May 2019.

We requested further information from the registered manager related to the service, this was provided promptly.



Is the service safe?

Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm.

Good: People were safe and protected from avoidable harm. Legal requirements were met.

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

- Staff had received safeguarding training and knew how to recognise signs of abuse. They were clear about their responsibilities for reporting concerns.
- •The registered manager had a good knowledge of safeguarding; and had raised issues with the Local Authority when concerns had been identified.

Assessing risk, safety monitoring and management

- Risk assessments were in place to reduce risks to people and guidance was regularly reviewed and updated.
- There were systems to keep people safe in the case of emergencies.

Staffing and recruitment:

• Recruitment practices continued to be safe. The relevant checks had been completed before staff worked with people in their homes.

Preventing and controlling infection

• Staff were provided with personal protective equipment for use to prevent the spread of infections. People said staff wore gloves when doing personal care. Records showed staff had received training in infection control.

Learning lessons when things go wrong

• The service continued to monitor and learn from any incidents and accidents.



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.

Good: People's outcomes were consistently good, and feedback confirmed this.

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

- Assessments and care plans were easy to follow, detailed and reflected the person's preferences and wishes.
- Care plans were regularly reviewed and updated with the person, their family and professionals when appropriate.

Staff support: induction, training, skills and experience

- Staff knew people and their needs well and were skilled in caring for people.
- Staff continued to receive regular training to ensure they had the necessary skills to carry out their role.
- Staff were supported through regular supervision and appraisals with opportunities to discuss any concerns, as well as their own personal development.

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

- If required, referrals were made to appropriate health professionals for further advice and guidance.
- Staff spoke knowledgeably about people's health needs and recognised the importance of being proactive in seeking guidance and support from health professionals.

Adapting service, design, decoration to meet people's needs

• People had the equipment they needed to promote their independence in their own homes. Staff were aware of their responsibility in ensuring equipment was safe before being used.



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

Good: People were supported and treated with dignity and respect; and involved as partners in their care.

Ensuring people are well treated and supported; equality and diversity

- We spoke with people and relatives about their views on the care provided. Comments made included; "We are so pleased" And "100 percent happy" with the service.
- People described the staff as being professional "Very friendly and very nice." One person said they "Can't praise her(staff) highly enough."

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

• People told us the staff always explained what they are going to do, and asked if they were happy for them to continue.

Respecting and promoting people's privacy, dignity and independence

- People we spoke with told us staff respected their privacy and dignity and staff were aware of their responsibilities to ensure this was prompted.
- People's personal information was kept secure and staff understood the importance of maintaining secure documents and care records to ensure people's confidentiality was maintained.



Is the service responsive?

Our findings

Responsive – this means we looked for evidence that the service met people's needs

Good: People's needs were met through good organisation and delivery.

Planning personalised care to meet people's needs, preferences, interests and give them choice and control

- People received care and support in a way that was flexible and responsive to their needs. One person said "Yes, the appointment times are kept and carers are never rushed it's a good service."
- Care plans provided staff with descriptions of people's abilities and how they should provide support in line with people's preferences. These were regularly reviewed to ensure they remained current and provided accurate information about how to meet the people's needs.
- The service was aware of their responsibility to meet the Accessible Information Standard, in providing information to people in their desired format.
- Staff provided information to enable people to ensure they had the support and encouragement to have choice and control in their everyday lives.

Improving care quality in response to complaints or concerns

- People were given information about the service, including their support plan and a copy of the complaints procedure.
- The complaints procedure explained how to make a complaint and set out how they could expect any concerns or complaints to be handled.

End of life care and support

• The service was not supporting any person with palliative or end of life care needs at the time of our inspection.



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

Good: The service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Planning and promoting person-centred, high-quality care and support; and how the provider understands and acts on duty of candour responsibility

- The service had a clear, positive and open culture that was shared both amongst the management team and care staff. Staff told us how passionate they were about providing good service which was personal to people.
- People were very much at the heart of the service. People described the service as "It's fantastic, really happy with it." And "Yes, they are great"

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

- There was a clear understanding from staff and the registered manager about what their day to day roles were.
- People and staff told us they were happy and liked the registered manager and could approach them at any time. People told us they felt the service was "Very well managed from what we can see. Very satisfied."
- The registered manager understood regulatory requirements and ensured these were carried out during their absence, such as notifying us of events.
- Audits were in place and undertaken regularly to review medicines, care plans, risk assessments, and health and safety and building checks.
- Staff told us they felt listened to and that the registered manager was approachable.

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

- Staff said the service's management were caring and supportive and that everyone worked well as a team.
- People's opinions about the service was sought in many ways. Each person had a keyworker, reviews were held regularly as were meetings.
- Regular staff meetings took place in order to ensure information was shared and expected standards were clear.

Continuous learning and improving care; working in partnership with others

- The service had made positive connections with professionals that could benefit people who used the service.
- The registered manager was given the opportunity to meet regularly with their peers within their provider

network. This allowed valuable sharing of good practice and an opportunity to discuss different ways of caring and supporting people for everybody's benefit and well-being.	