

Tabeth Ltd

# Tabeth Care

## Inspection report

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05 February 2019

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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: The service operates from a domestic dwelling in the Astley Bridge area of Bolton. There were two people currently using the service. One relative told us they were happy with the care their relative received.

People's experience of using the service.

There was a registered manager in post. Both the registered manager and the care coordinator are both registered nurses and have updated their training needs as required.

Areas of potential risk were identified, assessed and planned for to help keep people safe. Recruitment processes ensured that only fit and proper staff were employed to provide care and support.

Governance systems were in place to monitor the quality of the service. Policies and procedures were in place to support good practice.

The service met the characteristics for a rating of 'Good' in all the key questions we inspected.

More information is in our full report.

Why we inspected:

This was the first inspection of this service since registering on 27 July 2016. This inspection was part of our scheduled plan of visiting services to check the safety and quality of the care people received.

Follow up: ongoing monitoring; We will continue to monitor intelligence we receive about the service until we return to visit in line with our re-inspection programme. If any concerning information is received, 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?

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.

# Tabeth Care

## 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 was carried out by one adult social care inspector.

#### Service and service type:

This service is a domiciliary care agency. The service provides care personal care for adults learning disabilities or autistic spectrum disorder, mental health problems, older people, younger adults and physical disabilities.

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.

#### Notice of inspection:

We gave the service 48 hours' notice of the inspection visit because is small and the registered manager is often out of the office providing care. We needed to be sure that they would be in.

#### What we did:

Our inspection was informed by evidence we already held about the service. We also checked for feedback from relatives and the local authority quality monitoring and safeguarding team. We also spoke with Healthwatch Bolton. Healthwatch is the consumer champion in England for adult social care. We also looked at notifications we received from the service, one person's care records. We also looked at the records of accidents, incidents and complaints, audits and quality assurance reports. We spoke with the registered manager and received and email from a relative about the service.

# Is the service safe?

## Our findings

Safe – this means people were protected from abuse and avoidable harm:

At our inspection on 5 February 2019 we found that people were safe and protected from avoidable harm. Legal requirements were met. Therefore, the rating for this domain is 'Good'.

Staffing and recruitment:

- There was a satisfactory employment checks in place to ensure that fit and proper persons were employed to provide care and support to people.
- We looked at one personal file. This included all the necessary check included a check by the Disclosure and Barring Service (DBS). A DBS checks helps to ensure that people are suitable to work with vulnerable adults.
- At the time of the inspection there were two people using the service. Care and support were provided by the registered manager or the care coordinator.
- Calls times, the number of visits and the tasks to be completed were document in the care file we looked at.

Assessing risk, safety monitoring and management:

- We saw that the registered manager completed an initial assessment of people's needs. This was to ensure that staff could meet their needs.
- Risk assessments were completed. This set out the risks and control measures in place to mitigate the risks. For example, making sure that there is clear space for the use of walking aids to avoid trips and falls.
- There was a business continuity plan in place which set of how the delivery of care would continue during unplanned events, for example adverse weather conditions.

Systems and processes:

- People were protected from the risk of harm, abuse and discrimination. There was a safeguarding and whistleblowing policy in place. This set out the different types of abuse and how to raise concerns and referrals to the local authority safeguarding team. Both members of staff had completed safeguarding training.

Using medicines safely:

- We discussed with the registered manager about the safe handling of medicines for the people who used the service. We were told for one person that medicines were administered by the family and for another person it was to prompt and check that they had taken their tablets.
- We saw that when necessary that medicines were recorded on a medication administration record (MAR) sheet.
- There was a medication policy in place for staff to refer to.

#### Preventing and controlling infection:

- Both members of staff had completed infection control training.
- There was information in the care plan to remind staff about infection control. For example, as soon as you enter the house wash your hand and use the alcohol gel as provided.
- Staff had access to personal protective equipment such as disposal gloves and aprons.
- Staff had completed training in food hygiene, so they could safely prepare and make meals and clean up after preparation.

#### Recording of accidents and incidents:

- There was an accident book to record accidents and incidents that occurred to people who used the service and to staff.
- The registered manager was aware that serious accidents must be reported to the CQC.

# Is the service effective?

## Our findings

### Our findings

Effective – this means that people's care, treatment and support achieved good outcomes and promoted a good quality of life, based on best available evidence

People's outcomes were consistently good, and people's feedback confirmed they were satisfied with the care provided. Legal requirements were met. The rating for this domain is 'Good'.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law; Ensuring consent to care and treatment in line with law and guidance.

The Mental Capacity Act 2005 (MCA) provides a legal framework for making 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 decisions, any made on their behalf must be in their best interests and as least restrictive as possible.

- We found the provider work within the principles of the MCA so that people's rights were protected. Information was available to guide staff with regards to capacity and consent. The registered manager demonstrated a good understanding of the MCA.

Staff skills, knowledge and experience:

- The two staff at the agency were both registered nurses and had maintained their registration. Both members of staff had completed essential training. For example, moving and handling, medication and safeguarding.
- The registered manager was aware of staff supervisions and these will be factored in as staff numbers increased.

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

- Only one person was having meals prepared for them. Staff were aware of likes and dislikes and the importance of good nutrition and hydration. Family prepared meals for the other person who used the service.

Working with other agencies to provide consistent, effectively, timely care.

- People who used the service knew both members of staff well. The registered manager confirmed as and when the service grew they would endeavour to provide people with regular carers. The registered manager worked well with other healthcare professionals such as GPs to make sure that people's health and well-being was maintained.

# Is the service caring?

## Our findings

Caring – this means that the service involved people and treated them with compassion, kindness, dignity and respect.

People were supported and treated with dignity and respect; and involved as partners in their care. This domain was rated as 'Good'.

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

- Comments from people who had used the service were positive. Comments included, "Tabeth had such lovely nurses they were professional and courteous. They took very good care of me and I am beyond pleased with this service". Another said, "Amazing service! Very professional and amazing attention to detail". One relative told us, "I am very happy with the service provided to [Relative]."
- There was clear information in the care plan to guide staff on the support people required. For example, Staff to ask if there is anything else they can do before they leave and sit and listen if people wish to talk.
- The service demonstrated a clear commitment to the care of people, but also to the welfare of relatives.

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

- There was information in the care plans that demonstrated people who used the service and relatives had been involved in the care planning and reviewing.
- The care plans had been updated and reviewed to reflect any changes to the care and support required.
- We were provided with a copy of the Service User Guide that was given to people who used the service. The Service User Guide is a document that contained a lot of information about the agency. It clearly defined the principles of the agency which included; principles and values of the agency.

Respecting and promoting people's privacy, dignity and independence:

- Confidential personal information was assessed and stored correctly by the registered manager. This ensured the privacy of people's records.
- There was one male and one female member of staff. The registered manager explained there was the ability to provide gender specific care if requested.



# Is the service responsive?

## Our findings

Responsive – this means that services met people's needs

People's needs were met through good organisation and delivery. The domain was rated as 'Good'.

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

- People were provided with a flexible service that responded to their needs. Care plans provided good information on how people's assessed needs were to be met. This included personalised information on their background, hobbies and interests and likes, and dislikes. Records clearly guided staff on the support people wanted and needed.
- Care records showed people were involved in developing care and support plans.
- People's care records included an assessment of their needs, which took into consideration areas of equality and diversity. The staff were able to demonstrate how they maintained people's privacy and the importance of upholding people's human rights.
- People's changing care needs were identified promptly and reviewed with the involvement of relevant parties. Any changes to people's care and support needs were effectively communicated to staff.

End of life care and support:

- We were not made aware of anyone being cared for at the end of their life. Where this support may be required the service would liaise with relevant healthcare professionals to ensure people received the care and support they needed.

The Provision of accessible information:

- All providers of NHS care or other public – funded adult social care must meet the Accessible Information Standard (AIS). This applies to people who use the service and have information or communication needs because of a disability, impairment or sensory loss. There are five steps to AIS: identify, record, flag, share and meet. Even though this service was very small they had taken steps to meet some of the AIS standard in that information was available in large print for people who used the service. Further development meeting all five steps will be actioned as the service grows.

Improving care quality in response to complaints or concerns:

- The service had a complaints procedure which was outlined in the 'service user guide'. People were provided with a copy of the document on commencement of the service.
- A record of any complaints or concerns were maintained. Information showed that these were responded to appropriately.

## Is the service well-led?

### Our findings

Well-Led – this means that service leadership, management and governance assured high-quality, person-centred care; supported learning and innovation; and promoted an open, fair culture.

The service was well managed and well-led. The culture they created promoted high-quality, person-centred care. This domain is rated as 'Good'.

The manager and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements.

- 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.
- The service is open during normal office hours. People had contact details of the registered manager and the care coordinator in the event of an emergency.
- The service also had a business continuity plan. This provided information about what to do in the event of an incident or emergency that could disrupt the service so that people were protected.

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

- People and their relatives had been asked to comment on their experience and their views of the service.

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

- The culture of the service focused on delivering person-centred care that met people's needs. People felt they received a good standard of care, which met their individual needs. Comments included "I am satisfied with the service provider."
- Providers of health and social care services are required to inform the Care Quality Commission, (CQC), of important events which happen in their services. The registered manager was aware that CQC must be notified of significant events that may occur.

Continuous learning and improving care:

- Systems continued to be in place to monitor the quality of the service. The registered manager carried out monitoring and checks, which looked at key areas such as medication, staff training and competency and care plan reviews.

Working in partnership with others:

- The service worked with other services so that people's assessed needs were appropriately met, and their health and well-being was maintained.