

Mrs Barbara Jolanta Kosac

Nimble Care

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

About the service

Nimble Care is a domiciliary care service, providing personal care to people living in and around Chippenham.

Not everyone who used the service received personal care. CQC only inspects where people receive personal care. This is help with tasks related to personal hygiene and eating. Where they do, we also consider any wider social care provided. On the day of inspection, 13 people were receiving the regulated activity of personal care.

People's experience of using this service and what we found

People told us they felt safe using the service. People were cared for by staff who knew how to keep them safe and protect them from avoidable harm. One person's relative said, "I certainly do feel my [relative] is safe. The staff are entirely satisfactory; very nice people and friendly." There were enough staff available to meet people's needs. People told us staff always arrived at the scheduled time and stayed for the specified period. One person said, "Nothing gets rushed. It's excellent support." People were supported to take their medicines safely. Incidents and accidents were reported, investigated and actions taken to prevent recurrence.

People's needs were assessed, and care plans were in place. People were cared for by staff who had been trained to carry out their roles and who were knowledgeable about the support people needed. People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible and in their best interests; the policies and systems in the service supported this practice.

People told us they were cared for by kind and compassionate staff. Staff understood the need to respect people's privacy and dignity. One person said, "The staff are all so polite. Before they leave, they always ask if there is anything else they can do for me." One person's relative said, "When I go on holiday, I know that the carers will look after [relative] well." Staff said they found their role rewarding. One staff member said, "This isn't about just doing basic tasks. We are getting to really know people and providing proper care."

Staff were knowledgeable about people's support needs as well as people's preferences for how they wanted to be cared for. One person said, "It's quite social because I've got to know the staff and they know me. They know the routine and know what they're doing." There was a complaints procedure in place and people knew how to complain if they needed to. No complaints had been received.

Quality assurance processes were in place. Regular audits of all aspects of the service were undertaken. Staff spoke highly of the registered manager. Comments included, "She's a very pleasant manager, very easy to

...speak to about anything" and, "[Registered manager] is the nicest, kindest most empathetic person I have ever met. The fact she rolls up her sleeves and does visits because she loves it, is awesome."

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

This service was registered with us on 01 July 2020 and this is the first inspection. The last rating for the service at the previous premises was Good, published on 21 December 2018.

Why we inspected

This inspection was prompted by a review of the information we held about this service.

Follow up

We will continue to monitor information we receive about the service, which will help inform when we next inspect.

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 ●

Nimble 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 (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 Health and Social Care Act 2008.

Inspection team

The inspection was carried out by one 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.

Service and service type

This service is a domiciliary care agency. It provides personal care to people living in their own homes.

Registered Manager

This service is required to have a registered manager. A registered manager is a person who has registered with the Care Quality Commission to manage the service. 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 our inspection there was a registered manager in post.

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 registered manager would be in the office to support the inspection.

Inspection activity started on 06 May 2022 and ended on 10 May 2022. We visited the location's office on 06 May.

What we did before the inspection

We sought feedback from the local authority and professionals who work with the service. The provider was not asked to complete a Provider Information Return (PIR) prior to this inspection. A PIR is information

providers send us to give some key information about the service, what the service does well and improvements they plan to make. We used all this information to plan our inspection.

During the inspection

We spoke with five people who used the service and four people's relatives. We spoke with three members of staff and the registered manager who was also the provider and nominated individual. The nominated individual is responsible for supervising the management of the service on behalf of the provider. We spoke with one health professional who works with the service.

We reviewed a range of records. This included three people's care records. We looked at three staff files in relation to recruitment and staff supervision. A variety of other records relating to the management of the service, including policies and procedures were reviewed.

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 of 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

- The provider had systems in place to ensure people were safeguarded from the risk of abuse.
- Staff had received training in safeguarding people and knew how to report concerns. One member of staff said, "There is a section in the app, where we can document anything we feel needs to be reported, such as new bruises."
- Staff said they felt confident to raise concerns about poor standards of care. One member of staff said, "I would always report concerns about care. My priority is to support the client and not be fobbed off."

Assessing risk, safety monitoring and management

- Staff assessed risks to people's health, safety and wellbeing. Relevant risks included those relating to moving and handling, medicines, the home environment, skin care and nutrition.
- Risk assessments outlined measures to help reduce the likelihood of people being harmed and care plans contained detailed guidance for staff to follow to keep people safe.
- One person said, "I feel completely safe. They are exemplary." Another person said, "I only use one piece of equipment, but the staff know what they're doing."
- A member of staff said, "When I arrive, I always call out and let the client know I'm there. When I leave, I make sure to leave them safe, pendant alarm on, telephone and mobility aid close by."

Staffing and recruitment

- There was a policy in place for the safe recruitment of staff.
- Robust recruitment procedures were followed to ensure the right people were employed to work in the service.
- New staff shadowed more experienced staff and were introduced to people in their homes, prior to working with them.
- People using the service told us staff were always punctual. Comments included, "It's never a problem. They say they'll be there at nine o'clock, and they are" and, "I can't fault them for their time keeping, they are always on time."
- The service consisted of a small team of staff. The registered manager said, "We are a small team, but we are recruiting at the moment." Staff told us they felt there was enough staff to meet people's needs. People told us staff had never missed any visits.

Using medicines safely

- Medicines were managed safely.
- People were supported with their medicines by staff who had been trained and assessed as competent.

- One person said, "The staff are very careful with my tablets. I know exactly what I should be taking, and they get them ready for me."
- Regular audits were carried out to check that administration records had been signed and that stock balances were accurate.

Preventing and controlling infection

- Staff confirmed they had access to enough personal protective equipment (PPE) and had received infection control training.
- People confirmed staff always wore PPE during visits and changed gloves between tasks.
- Staff were part of a regular testing programme for COVID-19.
- The registered manager monitored staff adherence to infection control procedures as part of the staff spot check process they had in place.
- One person said, "Yes, they always have their bits [PPE] on."

Learning lessons when things go wrong

- Incidents and accidents were logged. Staff were able to report incidents via the electronic app which then flagged up on the system at the office.
- The reporting system showed that these were fully investigated and resolved.
- Lessons learned from incidents and accidents were shared with the team to prevent recurrence.

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.

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

- People's needs were assessed and regularly reviewed.
- The registered manager told us, "We do an initial assessment over the phone with the family and client. Then we arrange a face to face meeting and discuss all the info about the support the person wants and needs. Then we update the plan regularly as more information comes through."
- One person's relative said, "I prepared a document laying out what care was needed for [name] and met with the manager to agree."

Staff support: induction, training, skills and experience

- Records showed staff were provided with a wide range of training, had regular updates and unannounced spot checks of their care practices were carried out. The health and safety and training manager said, "New staff complete training, then do shadow shifts to observe and work with another member of staff until they feel confident."
- People's relatives told us they felt staff were well trained. One person's relative said, "I would say that they are. When things crop up, they seem to be pretty well informed to sort it out."
- Staff had regular supervision sessions. All staff spoke highly of how supported they felt in their role. One member of staff said, "On a daily basis I am asked, how is it, how are you. They want to make sure I'm happy. It makes me feel valued."

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

- Where required, people were supported to eat and drink well.
- Care plans detailed people's preferred food and drinks and how they liked staff to prepare them.
- One person's relative said, "Staff prepare [relative's] meal, wash it up, and leave the home clean and tidy."
- The registered manager said, "We always do a bit extra for people if we can, to make life easier. If someone tells us they've run out of milk, or need some bread, staff will pick some up for them. And when we serve meals, we always make sure we give them a folded napkin, like they're in a restaurant."

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

- Staff understood their responsibilities to support people to access services as needed. The registered manager said, "We have good relationships with local GP's. I'm proud of that because when I speak with the GP they always listen, and never disregard our assessments of clients."
- One person's relative said, "Yesterday, [registered manager] alerted me to my relative not being quite

right, and we talked about the right course of action for them. [Registered manager] called in to check on my relative three times during the day. It was such a relief to know, as I live so far away."

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 MCA 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 when this is in their best interests and legally authorised under the MCA. 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.

- People consented to their plan of care.
- Staff were aware of the principles of MCA. One staff member said, "I always say to people, shall I just close the curtains? And I always call out when I let myself in, so they know it's me in their home."
- People told us staff always asked before providing any support. One person said, "Staff always say, 'is it ok' before they do anything."

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

- Without exception, people spoke highly of the staff who supported them. Comments included, "They are all very nice people. One or two in particular are lovely. We have a lovely chat when they are here; it's what people need. They are very obliging people" and, "They are all very friendly. I really can't fault them."
- People's relatives also provided positive feedback. Comments included, "Yes, it's been very good. They treat [name] very well."
- All the staff we spoke with said they enjoyed their roles. One staff member said, "The care is excellent; it's client centred and because we have time, people don't feel rushed. Like today, my client loves to watch the birds, but the feeder was empty, so I was able to fill it, and sit and have a chat with the client watching the birds."
- The registered manager said, "I do this job because I love it. I love my clients to bits. Every single person is so interesting, I learn from them every day. When I have time, I sit with people and talk about their lives or read with them."
- People said they received care and support from a consistent and regular team of staff. One person said, "We have three or four regular carers." Another person said, "I have four main ones [staff] and I am very happy with them."

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

- People told us they were actively involved in planning and making decisions about their care. One person said, "The staff know me and my routine, but if I want something done differently, I tell them, and they listen and act on it."
- One member of staff said, "This company is really big on promoting independence and giving people choice. We have time to talk to people and find out exactly what they want."
- Another member of staff said, "I went to a client this morning who likes to wear rings and jewellery; it makes them feel good, so I know to get them out and ready to put on."

Respecting and promoting people's privacy, dignity and independence

- Staff knew how to maintain people's privacy and dignity. Staff gave examples of how they did this such as, "I always close curtains and never leave people exposed." One person said, "They always keep me covered, I never feel uncomfortable."
- Staff encouraged people to be as independent as possible. One person said, "They [staff] stand back a little when I'm in the shower and they help wash my back. I then dry what I can, and they dry my back. They don't takeover, they're just there to help me, as I'm a bit slow now."
- A health professional said, "I sometimes give people programmes to boost their strength and

independence, and the staff always encourage and help people with the exercises."

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

- Care plans contained detailed person-centred information for staff. This included people's preferences and choices for how they wanted to be supported. For example, in one person's plan, their preferred shower temperature was recorded.
- The service used an electronic planning system and handheld recording devices were used by staff to record their interactions with people. The devices enabled real time reporting and ensured that staff had easy access to information about the people they were supporting.
- Staff confirmed they had access to all the information they needed to support people. One member of staff said, "I can see everything on the system. All the information I need is in there. I also shadowed [registered manager] on visits when I started and was formally introduced to clients."
- One person's relative said, "The care and support has been a huge success in building my [relative] up. It's been remarkable how [name] has improved and strengthened with this homecare company in place."
- People were asked if they preferred support from a male or female member of staff. The registered manager said, "We ask if clients prefer male or female staff. We had one person who said they didn't mind a male preparing the meal but wanted a female to do personal care. So, we do our very best to accommodate."

Meeting people's communication needs

Since 2016 all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard. The Accessible Information Standard tells organisations what they have to do to help ensure people with a disability or sensory loss, and in some circumstances, their carers, get information in a way they can understand it. It also says that people should get the support they need in relation to communication.

- The registered manager and staff understood about the AIS. People's communication needs were identified and recorded in their care plans.
- The registered manager told us how staff communicated with one person who was unable to communicate their needs. They said, "We send the same staff so that they know and understand [person]. We tried a communication picture board, but the client didn't like it." A member of staff said, "We have a client with communication difficulties, but we have enough time to be with them and understand them, rather than having to rush."
- The registered manager said, "If clients request any information in a different font or language we can do that. We always try and do what is best for the client."

Improving care quality in response to complaints or concerns

- There was a complaints procedure in place. No complaints had been received.
- People and their relatives told us they knew how to complain but had no reason to. One person said, "[Registered manager] gave me her phone and email contact details so if I needed to speak to her about anything, I can get in touch."
- The registered manager told us they regularly attended visits in order to maintain the quality of the service. They said, "It enables me to keep an eye on things. Clients will tell me face to face if there are any issues or concerns."
- The service had received many compliments. Examples of these included, "Thank you all for the care you have given to me. I will always tell anyone looking for care that you will always be my first recommendation" and, "I just want to say thank you very much for your support and care during my treatment and afterwards. You helped me through what has been a difficult time. Thank you again."

End of life care and support

- At the time of the inspection, nobody using the service was receiving end of life care. The registered manager told us, "We have supported people at the end of life in the past, and it is something I feel proud to do."

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.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

- People and their relatives told us their support needs were met by the service. One person said, "They [staff] are very good, and keep a good eye on me. They've all got their own ways of helping me stay living in my home." One person's relative said, "They [staff] are all very good at their jobs, and [relative] is comfortable with all of them."
- Staff told us they were encouraged to speak up and make suggestions. One staff member said, "I did query the height of a commode that one client had. I asked if perhaps it needed to be reviewed by an occupational therapist and this was taken on board and actioned. [Registered manager] will always fix things and arrange things to make sure we give the best care to people."
- Staff said morale amongst the team was "good". One staff member said, "We've just had a pay increase, which makes you feel valued." Another staff member said, "I don't work full time, but I am still made to feel part of the time and made to feel important."
- Staff were aware of the provider's ethos of care. One staff member said, "This is a small company with a focus on providing professional one to one care of a very high standard, and I'm excited to be part of it."
- The registered manager said, "We are a small local team. I always focus on the quality of the service we provide to the clients and the high standard of care we deliver."
- A health professional said, "I would recommend the service. The staff care, they provide consistent care on time every time. The whole team is lovely."

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

- The registered manager understood the requirement to notify CQC of various incidents, so that we could monitor events happening in the service.
- Staff were clear about their roles. They had person-centred values and worked together as a team.

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

- People told us the registered manager was in regular contact. One person said, "[Registered manager] is the leader of the pack. We see her regularly, and she was here as a carer today."
- Another person said, "The lady in charge, [registered manager] comes once a week as a carer. She washes my hair, and she's the best one at doing it."

- People's relatives said, "[Registered manager] is an excellent manager" and, "I would unquestionably recommend this company. They keep us involved."
- Regular staff meetings took place. Minutes of these were available for staff who couldn't attend.

Continuous learning and improving care

- The registered manager had systems in place to monitor how the service was performing. This included a programme of audits covering all aspects of the service, spot checks of staff, training and competency assessments and regular reviews with people using the service. They told us they also kept informed of how the service was running by carrying out visits themselves. They said, "During visits, I always ask, 'Are you happy with everything, is the carer ok, any concerns you want to share with me?' I tell them I want the best for them so I reassure them that nothing will change unless they want it to."
- Formal surveys of staff and people had not been carried out. The registered manager said this was something they were currently reviewing.

Working in partnership with others

- The registered manager told us they had good working relationships with other professionals such as GP surgeries, and community teams. The registered manager said, "We get good feedback from health professionals."
- One health professional said, "I speak to [registered manager] a lot. She is very easy to get hold of and is always quick to ask for an assessment. She also is good at feeding back to me and makes sure I know how people are getting on. She really cares, about the clients and her staff."