

Belong Limited

# Belong at Home Didsbury

## Inspection report

178 Palatine Road  
Manchester  
Lancashire  
M20 2UW

Tel: 01618044200

Date of inspection visit:  
14 August 2019

Date of publication:  
16 September 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

Belong at Home Didsbury is a domiciliary care agency providing personal care to people in their own homes. 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. Three people were receiving support with their personal care at the time of our inspection.

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

People and relatives were very positive about the support they received and the kind and caring staff team. Staff visited at the agreed times and there had been no missed visits.

Staff were also positive about working for Belong at Home Didsbury. They felt well supported and received the training required for their role. Staff were safely recruited.

Clear care plans and risk assessments identified the support people wanted, what they were able to do for themselves and what the staff were to do at each visit. People and relatives were involved in agreeing and reviewing their care plans.

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.

Where identified in their care plan people received support with their medicines, food and health needs.

The registered manager had clear oversight of the service. They reviewed records monthly and annual observations of staff competencies were completed. Learning from incidents at any Belong service was shared with all Belong registered managers through regular registered manager's meetings.

People, relatives and staff said the registered manager was approachable and available for any advice or queries they had.

For more details, please see the full report which is on the CQC website at [www.cqc.org.uk](http://www.cqc.org.uk)

### Rating at last inspection

This service was registered with us on 22 August 2018 and this is the first inspection. Prior to this the domiciliary care service was part of the registration for Belong Morris Feinmann care home based at the same address. As such the domiciliary care service was included in the inspection at Belong Morris Feinmann. The overall rating for the care home, including the domiciliary care service, was good (published

8 August 2018). We have used the previous rating to inform our planning and decisions about the rating at this inspection.

#### Why we inspected

This was a planned inspection based on the previous rating.

#### Follow up

We will continue to monitor information we receive about the service until we return to visit as per our re-inspection programme. If we receive any concerning information 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?

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 ●

# Belong at Home Didsbury

## 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 Care Act 2014.

#### Inspection team

The inspection was completed by one inspector.

#### Service and service type

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

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 registered manager was also registered for Belong at Home Warrington.

#### Notice of inspection

We gave the service 48 hours' notice of the inspection. This was because it is a small service and we needed to be sure that the registered manager would be in the office to support the inspection.

Inspection activity started on 14 August 2019 when we visited the office location. We made phone calls to people supported by Belong at Home Didsbury, a relative and a member of staff after visiting the office location.

#### What we did before the inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority and professionals who work with the service. We used the information the provider sent us in the provider information return. This is information providers are required to send us with key information about their service, what they do well, and improvements they plan to make. This information

helps support our inspections. We used all of this information to plan our inspection.

During the inspection-

We spoke with two people supported by Belong at Home Didsbury and one relative. We spoke with five members of staff including the registered manager, senior carer, care workers and the practice development facilitator.

We reviewed a range of records. This included three people's care records and two medication records. We looked at two staff files in relation to recruitment and staff supervision. A variety of 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 for this newly registered service. This key question has been rated good. This meant people were safe and protected from avoidable harm.

### Assessing risk, safety monitoring and management

- Risks were identified during the initial assessment of a person's needs. Care plans and risk assessments provided clear step by step guidance for the staff to manage the identified risk.
- Clear guidance was in place for any moving and handling support people needed.
- Information for any equipment the person used was contained in the care plan, for example a stair lift or wheeled frame.
- An assessment of the environmental risks staff may face when supporting people in their own home was completed. This included external lighting, the condition of any electrical appliances staff needed to use and if there were smoke alarms in the property.

### Staffing and recruitment

- Staff continued to be safely recruited.
- Rotas showed there were enough staff to make all the scheduled support visits. People and a relative told us staff arrived on time, stayed for the full allotted time of the support visit and visits were never missed. One person said, "The staff stay the full time of the visit, do what I ask and do it well. I'm very pleased."
- People said they received support from regular staff. One person said, "I always know who is due to come in each day."
- People were introduced to any new staff before the new staff member made any support visits on their own. A relative said, "They introduced a new staff member with staff mum already knew. They went through the routines, what she can do, what she can't. It was managed really well as mum can be anxious."

### Using medicines safely

- Where required people were supported to take their medicines.
- An assessment of the support, if any, people needed to take their medicines was completed. Where staff administered medicines, they completed medicine administration records to show people had received their medicines.
- The assessment was clear as to who was responsible for the re-ordering, administration, storage and disposal of medicines.

### Preventing and controlling infection

- Staff received training in infection control and food hygiene.
- Personal protective equipment (PPE) was available for staff to use. Observations of practice were used to check PPE was being used and staff were following the service's policies and procedures to reduce the risks of infections.

Systems and processes to safeguard people from the risk of abuse

- People and their relatives thought they were safe when being supported by Belong at Home Didsbury staff.
- Staff knew the procedures for reporting any concerns they had and had completed training in safeguarding vulnerable adults.

Learning lessons when things go wrong

- Incident forms were used to record any incidents, for example if someone had fallen. These were reviewed by the registered manager and any action to reduce a re-occurrence noted.
- Incidents that had happened when the staff were not present were also recorded, when known, so they could be discussed with the person and inform a review of their care plan and support needs.

# 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.

Staff support: induction, training, skills and experience

- Staff were very positive about the induction, training and support they received. Training was refreshed annually, with questionnaires being used to check staff understanding of the course.
- New staff completed a two-week induction programme which included training and shadowing experienced staff so they could get to know people and their support needs before undertaking support visits on their own.
- New staff completed an induction work book during their first three months of employment. The registered manager and senior carer observed staff to ensure they were competent for their roles. Observations were then completed annually for all staff.
- Staff were encouraged to complete formal qualifications relevant to their role.
- Staff had regular supervision meetings, which they found useful. These discussed people's support needs as well as any training or development the staff wanted.

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

- Care plans specified where people needed support with their meals. This included if people needed assistance or encouragement to eat their food. A relative told us, "The previous carers (after a previous fall), she didn't get on with. There were communication issues and they didn't stay the full time. With Belong they will sit with her, encourage her, such as prompting her with new foods or suggesting she tries to eat more fruit."
- Staff ensured people had food and drinks available at the end of their visits.

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

- Staff explained that they monitored people's health at every visit and would contact the person's family, GP or ambulance if people were unwell. Staff would liaise with the registered manager to cover their calls if they had to stay with a person until the paramedics arrived.
- If people wanted, arrangements could be made for additional support to attend medical appointments.
- If required, the service worked alongside other professionals, for example district nurses or other care agencies.

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

- Prior to Belong at Home Didsbury supporting a person, an initial assessment of their needs and the support they wanted was carried out. This identified all tasks to be completed by the support staff at each visit and assessed any risks there may be for the person or staff members.

- People, their relatives and relevant professionals, where appropriate, were involved in the initial assessment.
- Staff said they were always introduced to new people they would be supporting by the registered manager or senior carer who had completed the initial assessment. This meant they could get to know the person and their needs.

#### 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 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 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's capacity to agree to their support was assessed at the initial assessment and at the annual review of people's needs.
- A statement was made by the assessor as to whether the person had been involved in planning and agreeing their care and that they had the capacity to do so.
- At the time of our inspection all the people being supported had the capacity to agree to their care and support. We discussed with the registered manager the steps they would take if a person no longer had the capacity to consent to their care. The registered manager was aware of the procedure to follow in this event.
- Belong employed their own Admiral nurses, who are specialists in dementia care. They were available to provide advice with regard to capacity issues if required.
- Where families had a lasting power of attorney (LPA) agreement in place a copy was held in people's care files. An LPA enables people named in the agreement to legally make decisions on people's behalf if they no longer have the capacity to make the decision themselves.

# 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

- All the people, relatives and friends we spoke with were complimentary about the staff who supported them.
- We were told, "I'm most satisfied, they're (the staff) all excellent. They're very punctual, very dependable" and "I'm very happy; they're very good, the girls are lovely. They do the work and keep me company."
- People and relatives said the staff would ask if there was anything else they wanted them to do before they left. For example, a relative said, "The staff will stay longer if they've not finished or if needed. They will do the shopping if I'm away and [name] needs something."
- Staff knew people's needs well and were able to describe the support people needed. One staff member said, "It's all about the customer. We need to ask what they want and how they want to do it."
- People's care plans contained brief details about people's life history and family, to give staff some background information about the people they were supporting.
- Any cultural needs were identified during the initial assessment, including any religious observance. Belong at Home Didsbury supported some people who identified as Jewish. All staff received training on Judaism as part of their induction. The registered manager told us people observed their faith how they wanted to, and staff would support them to do this when required.
- Training was also provided for equality and diversity, including information about the protective characteristics, for both people being supported and staff colleagues.

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

- People and their relatives were involved in agreeing the support they needed, their care plans and the times of their support visits. One person said, "[Registered manager] has been round to check that everything is okay and we go through the care plan."
- At the time of our inspection the people supported by the service could verbally communicate their needs and wishes. The care plans had a specific section to identify any communication needs during the initial assessment or subsequent reviews.
- People and relatives said they could contact the registered manager or care co-ordinator at the office if they needed to.

Respecting and promoting people's privacy, dignity and independence

- Staff were able to explain how they maintained people's privacy and dignity when providing support. One member of staff said, "I talk through what I'm going to do to make sure they are okay with it; I don't take anything for granted." A person told us, "Privacy - of course. When I'm showering they (the staff) leave me to do the things I can do myself; they go off and make the bed or something else."

- Care plans detailed what people were able to do themselves and where they needed support. This meant staff would not do things for people they were able to do themselves.
- Staff also explained how they encouraged people to complete tasks for themselves where possible. One member of staff said, "[Name] likes to wash herself as much as she can so we just support for the areas she struggles to reach."
- A relative told us how Belong at Home Didsbury staff had encouraged their relative to try new things for themselves. They said, "Mum's learning how to do new things, such as using a microwave or using the new one cup kettle. Mums been transformed."

# 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 clearly identified the support people needed and what the staff would do at each visit.
- Care plans were reviewed after three months of the service starting and then on an annual basis or when people's needs changed. People and their relatives were involved in agreeing their care plans. One relative said, "I've been involved in the care plans and agreed the support at the beginning; it worked really well."
- Staff told us how they reported any changes in people's needs to the registered manager who would then review the care plans and negotiate additional time for the visits if required.

Meeting people's communication needs

Since 2016 onwards all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard (AIS). The standard was introduced to make sure people are given information in a way they can understand. The standard applies to all people with a disability, impairment or sensory loss and in some circumstances to their carers.

- At the time of our inspection the people supported by the service did not have any additional communication needs. We were told the Belong central marketing office was able to produce information in a range of formats if required, for example large print, braille or in an audio format.

Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities that are socially and culturally relevant to them

- If people were supported to access the local community as part of their agreed support, this was documented in their care plan.

Improving care quality in response to complaints or concerns

- Belong at Home Didsbury had a complaints policy in place. This was included in the service user guide given to each person using the service.
- At the time of our inspection there had not been any formal complaints made. People told us they would phone the office if they needed anything and this would resolve any issues.

End of life care and support

- No one was receiving end of life support at the time of our inspection.
- Staff received training in end of life care as part of their induction and refresher training.
- The registered manager explained they would work with other professionals, for example GPs, district nurses and MacMillan nurses, when supporting people at the end of their lives.

## 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.

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

- The registered manager and senior support worker split their time between the Didsbury and Warrington services. Staff told us that they could always contact them for advice if needed and each was present in the Didsbury service at least twice per week.
- The registered manager had a clear oversight of the service. They monitored call visit logs each week, reviewed all incident reports and logged these in a database to monitor any trends or patterns. Medicine administration records and daily records were audited each month and any issues found were followed up with staff. Care plans were regularly reviewed and updated.
- The registered manager and senior carer completed annual spot checks and observations for staff to observe how they interacted with people, how they carried out the agreed support routines and to check staff used thorough hand washing techniques.
- The practice and development facilitator maintained a matrix for all staff training and provided a report for the registered manager about any training that staff needed to complete or refresh.
- The Belong Operations Manager also completed audits on care files every quarter.

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

- People and relatives said they were able to contact the registered manager and they were helpful in resolving any issues. One person said, "I phone the office quite often, [registered manager] sees me and asks if everything is okay."
- Staff said they enjoyed working at the service and felt well supported by the registered manager and senior support worker. Staff said the registered manager and senior support worker were open and approachable.
- The registered manager knew the kind of incidents that needed to be notified to the Care Quality Commission.
- The provider, Belong, had achieved the Investors in People gold award. This is in recognition that the company is committed to staff training, including courses outside of the mandatory courses required for each role.

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

- People and relatives were involved in reviewing and agreeing their care and support plans.
- Regular team meetings were held, which staff said were open discussions where their contributions were encouraged.
- Belong undertook an annual survey for people and relatives. A report was compiled centrally for each individual Belong service so that any concerns raised could be addressed. At the time of our inspection the 2019 survey had not been completed.

Continuous learning and improving care; Working in partnership with others

- All incidents were reviewed, and actions put in place to reduce the chance of a re-occurrence.
- A meeting for registered managers from all Belong services was held every three months. Incidents from any service were discussed to support learning across all services and to reduce the risk of similar incidents happening in a different service.