

Mrs Miranda Kate Cobbe

Home Sweet Home Reablement Services

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

The Inspection took place on 12 September 2016 and 29 September 2016 and it was announced at short notice to ensure that the registered manager/provider was available.

Home Sweet Home Reablement Service is registered to provide personal care to older people, some of whom may be living with dementia. The service provides care and support to people in their own homes in order for them to remain as independent as they are able to be.

There was a registered manager 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.

People received safe care and support. Staff had a good understanding of how to protect people from the risk of harm. There were sufficient staff that had been appropriately recruited to ensure they were suitable to work with vulnerable people. Where people were supported with their medication it was done so correctly and people received it as prescribed.

Staff were well trained and supported and had the knowledge and skills to carry out their role competently. They had access to guidance and information to support them when necessary. The registered manager and staff had a good understanding of the Mental Capacity Act (MCA) 2005 and had received training to ensure that where people lacked the capacity to make decisions they were protected. People were supported to maintain a healthy balanced diet and their healthcare needs had been met.

Staff were kind, caring and thoughtful and they knew the people they cared for well. They respected people and ensured that their privacy and dignity was always maintained. People expressed their views and opinions and were supported to follow their individual hobbies and interests. The service provided people with advocacy contact details for use if needed.

People's care and support needs had been fully assessed and there were care plans and risk assessments in place to ensure that people were cared for in a way they preferred. The care plans provided staff with the information that they needed to meet individual's needs and preferences and to care for them safely.

People were confident that their concerns or complaints would be listened to and acted upon. There was an effective system in place to assess and monitor the quality of the service and to drive improvements.

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.

People were protected from the risk of harm. Staff had been safely recruited and there were sufficient suitable, skilled and qualified staff to meet people's assessed needs.

Medication management was good and ensured that people received their medication as prescribed.

Is the service effective?

Good ●

People were cared for by well trained and supported staff.

The registered manager/provider had a good knowledge of the Mental Capacity Act (2005). Staff demonstrated a good understanding of why people might need support in making decisions.

People were supported to have sufficient food and drink to meet their individual needs and preferences.

People experienced positive outcomes regarding their healthcare needs.

Is the service caring?

Good ●

The service was caring.

Staff knew the people they cared for well; they were kind, caring and thoughtful and treated people with respect.

People were fully involved in their care and support and advocacy services were available if needed.

Is the service responsive?

Good ●

The service was responsive.

The assessment and care plans were detailed and informative and they provided staff with enough information to meet people's diverse needs.

There was a clear complaints procedure in place and people were confident that their complaints would be dealt with appropriately.

Is the service well-led?

Good ●

The service was well led.

People who used the service, their relatives and staff had confidence in the registered manager/provider and staff shared their vision to provide high quality care and support.

There was an effective quality assurance system in place to monitor the service and drive improvements.

Home Sweet Home Reablement Services

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 inspection took place on 12 and 29 September 2016 and it was announced with short notice to ensure that the provider was available. It 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.

We reviewed any information that we hold about the service such as safeguarding information and notifications. Notifications are the events happening in the service that the provider is required to tell us about. We used this information to plan what areas we were going to focus on during our inspection.

We spoke with seven people and 10 of their relatives, the registered manager/provider and five staff. We also sought the views of seven health and social care professionals. People's comments are reflected throughout this report. We reviewed six people's care files and five staff member's recruitment and support records. We also looked at a sample of the service's policies, audits, training and complaint records.

Is the service safe?

Our findings

People were protected from the risk of abuse. They repeatedly told us that they felt safe with staff, and believed them to be trustworthy. The registered manager/provider and staff demonstrated a good knowledge of safeguarding procedures and when to apply them and there was a policy and procedure available for staff to refer to when needed. Staff had been trained in safeguarding people and knew the actions to take if they witnessed or suspected abuse. One staff member told us, "I would report any concerns about abuse to the manager or the local authority." Another staff member said, "I had on-line training which was very good and I know to report any concerns."

One health and social care professional said, "I have had discussions at reviews with adults and their families regarding the service they have received and they have all stated they feel safe knowing Home Sweet Home Reablement Service (HSH) are going into them. HSH have in the past supported a family when they went on holiday to be the first point of contact for Careline while the family were away on holiday. Careline is a home security system that offers people peace of mind as they can press their alarm (can be in the form of a pendant which is worn round the neck) in the event of an emergency such as a fall or other accident in the home. This holiday would not have been as enjoyable for the family without that support and the adult was safe knowing care and support would be at hand if required." They went on to say that, "The staff are willing to go above and beyond their job role to safeguard and support vulnerable adults in the community."

Risks to people's health and safety were well managed. Staff had received training in first aid and health and safety and they knew to call the emergency services when needed. People had risk assessments together with management plans for their mobility, skincare and nutrition. Staff had a good knowledge of people's identified risks and described how they would manage them. One person had a problem with a beehive in their garden and the person's family was on holiday at the time. The service sent a text to the family to inform them and to let them know that they would get the beehive taken away as the person using the service was at risk of being stung by the bees. Their relative told us, "They [staff] acted promptly and efficiently after checking with me first to ensure that my relative was not at risk." Another person enjoyed going out in the local community but their mobility limited them from doing so on their own. The service supported them to visit the seafront for an ice cream and to enjoy the pleasant views of the sea. This showed that people were supported to take every day risks and to maintain their independence.

The registered manager/provider is a qualified occupational therapist with 15 years' experience and the service also employed a physiotherapist. People's mobility had been fully assessed and an occupational therapy plan put in place to meet their needs.

People told us there were sufficient staff to meet their assessed needs. They said that their care was consistent, reliable and punctual which helped them tremendously and gave them peace of mind. The registered manager/provider told us and people confirmed that staff arrived in good time and that if there were any delays staff always notified them by telephone. The service user guide informed people that if a member of staff was more than 15 minutes later than the time stated in their care plan they should inform

the office so they could take immediate action to ensure that people received the care they needed. One person said, "The staff are rarely late and if they are for any reason they always let me know that they are on their way." Another person said, "They [staff] are very reliable and on time." Others told us, "It's never a new person, always someone I feel relaxed with." "There is no sense of being rushed ever. They [staff] stay for the full time, and often beyond I think." And, "They're absolutely marvellous, it's always someone I know, and who knows me."

There were robust recruitment processes in place to ensure that people were supported by suitable care workers. The registered manager/provider had obtained all of the appropriate checks in line with regulatory requirements, for example Disclosure and Barring checks (DBS) and written references before care workers started work. One relative told us, "They recruit exactly the right sort of people; I think they all have the same caring, easy-going attitude." Staff told us that the recruitment process was thorough and they had not been able to start work until all the checks had been carried out.

Most people told us that they, or their relatives, took responsibility for their medication. Where the service supported people with their medication it had been clearly documented in their care plans. A medication risk assessment had been undertaken and people or their representative had signed to confirm their consent to it. There were medication profiles in place where necessary and the service had devised a medication administration record (MAR). People told us that where staff supported them with their medication they did so correctly. One relative told us, "The staff only help with my relative's morning medication. They're very good, I don't have to remind them and they keep a written record of it all." Another relative said, "Staff visit my relative four times a day, and are responsible for all of their medication. They [staff] take this seriously, and there has never been an issue surrounding the medication." Staff had been trained and demonstrated a good knowledge of people's medicine needs and they gave people their medication appropriately. Staff's competency to administer medication was regularly checked through spot checks as part of the supervision process. This showed that people received their medication safely and as prescribed.

Is the service effective?

Our findings

People were cared for by staff that felt supported and valued. There was a good induction process which included shadowing more experienced staff until the new member of staff was deemed competent to deliver care alone. One staff member told us, "When there is a new person requiring care we always go with a senior member of staff on their first visit. We have time to read the care plans and risk assessments so we know how to best care for the person correctly." Staff told us, and the records confirmed that they had received regular supervision and they said that they felt well supported by the registered manager/provider. A staff member told us, "The manager is very experienced and knows how to meet people's needs effectively. They are very supportive and always at the end of a telephone if I need them." One health and social care professional said, "The registered manager/provider and their team are very effective in their job roles, they are supportive, friendly and caring."

Staff told us that their induction was good. One staff member said, "My induction provided me with the knowledge I needed to care for people properly." Another staff member said, "When we go into new people we go in with staff that already knows them well. We never go into a new person alone." Several people told us that when a new member of staff was appointed, they were first brought to them by a familiar member of staff who introduced them. One person said, "I really appreciate this as I would not like strangers walking into my home."

Staff had the knowledge and skills to care for people effectively. People told us that staff were 'thoroughly competent' and well trained. One person said, "The staff are fully able to support me. They understand my abilities and my limitations. I am always in safe hands." Staff told us, and the records confirmed that they had received a wide range of training that was appropriate for their role and in line with the needs of the people they cared for. However, some areas of training required updating such as for moving and handling and the prevention of control and infection. The registered manager/provider told us, and the staff members we spoke with confirmed that staff were in the process of updating their knowledge by refreshing their training. One staff member said, "I think that the training is fine. It is mainly on-line training but at times this is better because I can do it at a time that better suits me." New staff were in the process of completing the care certificate. The Care Certificate is a set of minimum standards which staff new to care complete as part of their induction. People were cared for by well trained staff.

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.

We checked whether the service was working within the principles of the MCA. All of the people using the service at the time of this inspection had capacity to make their own decisions. However, there was information and guidance available to staff and the registered manager/provider had plans in place for all of the staff to undertake MCA training. Staff demonstrated a good understanding of why people might need

support in making decisions. One staff member said, "Although I have not yet done my training I know that you have to make decisions for vulnerable people in their best interests." Another staff member told us, "I am planning to do my MCA training on-line. I am aware that some people are not able to make decisions sometimes and that they have to be protected." People told us that staff always asked them for their consent before carrying out any tasks.

Where people required support with food and drink, the service provided the time for staff to prepare and cook a meal if the person wanted it. Staff told us that some people preferred microwave meals. One member of staff said, "I go to one person who really enjoys a home cooked meal so I ensure they always get fresh vegetables with their meal." Another staff member said, "In addition to a main meal I make sure that people have access to other food and drink should they fancy something later." One relative said, "The staff always offer my relative a choice of meals and the food is prepared in an appetising and attractive manner. They will always pop to the shop for them if my relative wants something different." People were supported to have sufficient to eat and drink and to maintain a balanced diet.

People's healthcare needs were met. They told us that generally their relatives supported them with their health requirements. However, staff would support them to attend healthcare appointments if necessary. For example, emergency visits to hospital or to a doctor's appointments. One person told us, "They [staff] would notice if I wasn't well. Recently I needed emergency hospital treatment and the staff called 999 and informed my relative and stayed with me until they were no longer needed." Another person said, "They [staff] always take their time, they never make me feel rushed, and they notice when I am not well, they don't miss a thing." One relative told us, "They pick up when my relative is not well and always phone to let me know. One time they went to hospital with my relative and stayed with them until I got there." The registered manager/provider told us, and the records confirmed that outcomes of health care appointments were recorded in the person's daily visit report sheets. This made it difficult to track when people required any follow up actions so the registered manager/provider has since devised a form for recording this very important information. They have confirmed that health appointments are now recorded on the new health appointment record sheets.

Is the service caring?

Our findings

People told us that staff were caring and thoughtful, and always listened to their requests. One person told us, "They [staff] are very caring towards me; they're the right sort of people if you know what I mean." Another person said, "They [staff] are very kind towards me, they are so good I feel that I could ask them to do anything and they would do it." One relative told us, "The staff are always jolly and friendly with a smile on their face. If my relative is a 'bit down, they will chat about old times, reminisce with them about their life...there's no rushing in and out."

Staff knew the people they care for well and had built up positive caring relationships with them. They knew their likes and dislikes and what made them happy or sad. For example one person said, "The staff are quite jolly, always very cheerful and they know when to have a laugh with me." Another person told us, "I do feel listened to all of the time. I've got a chair in my shower, and it's a joint effort. I do the things I can for myself and staff know when to help me to do the things I can't." One relative told us about how their family member liked dogs but was no longer able to keep one themselves. They said, "Staff know that my relative likes dogs, so sometimes they take their one round, and they both take the dog out for a walk. My relative loves it."

One health and social care professional said, "The registered manager/provider and their team are very caring and they all have the ability to provide care for the adults in the community with a range of complex health needs. The care workers always assist with what is required and will make sure the adult has the care needs met before leaving. One example of this was that one of my adults loved their music and dancing if care workers had time at the end of their care call they would put their favourite song on and have a dance with them. The family and adult were so happy this was happening and it really helped to break the isolation the adult sometimes felt." Another health and social care professional told us, "I have spoken to the registered manager/provider and the care co-ordinator on many occasions and they have always been very supportive to adult social care, the adults and their families in the community."

People were treated with dignity and respect. People told us that the staff were patient, kind and understanding and that they never rushed them. One person said, "They treat me respectfully, they respect my wishes." One relative told us, "They [staff] always knock on my relative's door even though they know the key safe number. They [staff] know that my relative likes to answer the door themselves when they are well enough to do so and they respect that."

Staff supported people to maintain their independence. One person said, "The staff are here to get me better, so I am doing as much as I can for myself. Some days I can do my own breakfast, other day's staff does it for me." Other people told us how they had been supported to go swimming and to keep up with their individual hobbies and interests as much as was possible.

People told us that were actively involved in making decisions about their care and support. They said that the registered manager/provider and staff listened to them and took appropriate action on what they said. One person said, "Staff are always very respectful and polite to me and listen to what I have to say." One

relative told us, "All of the staff treat my relative very well and they are so kind to them." Another relative said, "They [service name] seem to really care about people....it's a reasonably small company, so they can be a bit more personal, I think." The care files contained good information about people's likes and dislikes. Staff told us this helped them to care for people in a way that they preferred.

The service provided people with information about advocacy services in their pre- service information pack. An advocate supports a person to have an independent voice and enables them to express their views when they are unable to do so for themselves. This meant that people had access to advocacy contact telephone numbers and addresses should they or their families need them.

Is the service responsive?

Our findings

People received personalised care that was responsive to their individual needs. The registered manager/provider had undertaken a full assessment of their needs prior to their service starting. People told us that the assessment process was thorough. Relatives said that they had been involved in the assessment process and were consulted about their family member's care on a regular basis. People said that the service was responsive, reliable and flexible. One person said, "The service is extremely flexible and has been able to change things for us at a moment's notice." A relative told us how the service had changed plans with short notice. They said, "My relative was due to go swimming, but at the last minute changed their mind. It wasn't a problem as the member of staff took them out for tea and cakes instead." People said that the service was very pro-active, and that staff noticed if there was a small change in someone's needs. The care plans were individual and contained all of the information needed for staff to support people effectively. The daily visit report sheets had been recently improved as important information such as appropriate tasks and other outcomes of the visit had been difficult to read in the previous version. The care plans had been reviewed, when required according to people's changing needs.

People and their relatives told us they had confidence in the service. One person said, "Nothing is ever too much trouble for staff. I know they will do what is right for me." Another person said, "If anything is worrying me, the staff will sort it out." A relative told us that they had every confidence in the staff. They said, "Staff take my relative out and I know that they are in good hands. They would pick up if my relative was in any pain even though [person's name] is not able to tell them. The staff know how to communicate with them."

We received feedback from three different health and social care professionals who all told us they had confidence in the service. One said, "The registered manager/provider and their team have always been responsive, by responding to messages and calls quickly, they are willing to take adults on at short notice and are willing to visit the adult to undertake assessments within a day or two to make sure they can provide a service to them that can meet their needs." Another said, "The registered manager/provider has always been honest and has undertaken thorough assessments before taking a case on and providing honest professional input. They have never taken on an adult knowing they would not be able to meet the needs of the adult." And another said, "I have worked with Home Sweet Home for about two years and have always found them to be excellent in every way. They always respond to every query that we may raise promptly. We have referred several clients to them and we find them to be very thorough. They are very caring and always choose the right carer to the right client. They really show a true understanding of what it is like for people to live with dementia. If we have had to raise any issues they have always be dealt with very promptly and professionally. They are excellent to deal with." People received a service that was responsive to their needs.

People told us that staff encouraged and supported them to follow their own interests and hobbies. For example one person was supported to play snooker, another was supported to attend a singing class and another person was supported to regularly go swimming. Relatives told us that these activities were of immense importance to people and that the service supported them to maintain an active social life.

People said that the registered manager/provider regularly asked them for their views and opinions. They told us they knew how to complain. One relative said, "My relative had some issues with one member of staff so we telephoned the manager and it was dealt with quickly to our satisfaction." One health and social care professional told us, "I have never received a complaint or concern regarding any service or support received from Home Sweet Home Reablement Service. I have only ever received positive responses." There was a detailed complaints procedure in place which people had received in writing in their care plan pack before their service started.

Is the service well-led?

Our findings

People told us that they knew the registered manager/provider and that they were approachable and good at their job. One person said, "The manager is very approachable. They are pleasant and helpful and very hands-on." One health and social care professional told us, "I have had many dealings with Home Sweet Home Reablement Service over the last couple of years. I have always found them to be extremely helpful going above and beyond in a professional manner to help the adults they are working with. I feel Home Sweet Home Reablement Service is extremely well led. The management have always been very approachable, honest and caring. The adults in the community receive an excellent service due to the care workers enjoying their job, caring for the adults and having a management team that is willing to support them, help them and undertake caring role tasks themselves." The registered manager/provider knew people well and people knew and trusted them.

People said that the registered manager/provider was always available. One relative said that they had been given their telephone number in case they needed to contact them at any time. People told us they had confidence in the registered manager/provider and their staff team. Comments included, "The manager looks after people well. I feel that they run a tight ship." "I appreciate their [staff] thoughtfulness. They send me a text updates to let me know how my relative has been. It's very helpful and thoughtful of them." And, "It is a shame that other agencies are not as well managed or as successful as Home Sweet Home Reablement Service."

Staff told us they felt that the registered manager/provider was very supportive and was always available if they needed help or guidance. They said that they felt valued and they shared the registered manager/provider's vision for the service to provide a good quality service that supports people to achieve their optimum state of health and well-being. There were clear whistle blowing, safeguarding and complaints procedures in place. Staff understood the procedures and how to apply them in practice. One staff member said, "I would report any concerns immediately and make sure that the person was kept safe." Another staff member told us that they felt the registered manager/provider would deal with any issues or concerns swiftly to ensure people's safety.

We were repeatedly told that people were completely satisfied, and considered they very fortunate to have such a caring, and reliable agency. People said they were kept actively involved in their care and support. One person said, "They treat me like a person, not a number." Another person told us, "I'd absolutely praise them [staff], I'm quite satisfied because they're really so considerate towards me." Relatives spoken with were very positive about the service and their comments included, "The care staff are so flexible and helpful." "We feel lucky to have them; they seem more personal than some you hear about...they are so kind to [person's name] that we think of them like friends."

Staff told us that they communicated well with each other, people who used the service and their relatives. One relative told us, "Communication between us is excellent. They leave me notes such as '[person's name] is a bit wobbly today.' Another relative said, "My relative is very fond of the staff, they communicate well, are supportive, protective and very understanding of their needs." Regular staff meetings had taken place where

a range of issues such as care practices, safeguarding people, medication and training had been discussed. Staff said that there was always sufficient time allowed in their meetings for them to raise and discuss any issues. They told us they felt very involved in the running of the service and that the registered manager/provider always took staff's views into account. This showed that there was good communication and teamwork between management, the staff, people using the service and their families.

There was an effective quality monitoring system in place. People's views had been sought and the registered manager/provider had analysed the responses and taken action to improve where necessary. In addition to regular questionnaires being sent to people and their relatives, the registered manager/provider frequently telephoned people to ensure they were satisfied with the service. Regular audits had taken place such as for medication, recruitment and care plans. People's personal records were safely stored in a locked filing cabinet inside a locked office when not in use. The registered manager/provider had access to up to date information and shared this with staff to ensure that they had the knowledge to keep people safe and provide a good quality service.

People repeatedly told us that they would wholeheartedly recommend Home Sweet Home Reablement Service. One person said, "I've already recommended them to a neighbour, and to some friends – I've got no hesitation at all." A relative told us, "Home Sweet Home Reablement Service is a very well-run, efficient company. It delivers everything that it promised at the outset." Other comments included, "I have never asked them to do anything without them coming up trumps. I'd recommend them to anyone." "I have nothing but praise for this agency." And, "I can't think of anything they [service name] could do to improve the service I receive. It is marvellous."