

BlueBelles Care Agency

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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

This inspection took place on 7 August 2018 was announced.

BlueBells Care Agency is a domiciliary care agency. It provides personal care to people living in their own houses and flats in the community. It provides a service to people in Kington and the surrounding areas of Herefordshire. At the time of our inspection the provider was providing personal care for 20 people.

At the last inspection on 8 October 2015, the service was rated 'Good.' At this inspection we found evidence continued to support the overall rating of 'Good.' This inspection report is written in a shorter format, because our overall rating of the service has not changed since our last inspection.

People continued to receive care, which protected them from avoidable harm and abuse. Staff responded to and met people's needs safely. Risks to people's safety were identified and measures were in place to help reduce these risks. Staff continued to be recruited safely by the provider, and checks were completed on new staff to make sure they were suitable to support people in their own homes. There were sufficient numbers of staff to support people effectively. Medication administration continued to be safe.

People continued to receive care that was effective in meeting their needs, by staff who had the knowledge and skills to support them. People's rights with regards to consent and making their own decisions continued to be respected by staff.

People were supported by staff who knew them well and had caring relationships with them. People felt involved in their own care and staff and managers listened to what they wanted. Staff respected people's privacy and dignity when they supported them and promoted their independence.

People continued to receive care and support that was individual to them. People were encouraged to raise concerns and make complaints and were confident these would be dealt with. The provider was an inclusive service and promoted equality, diversity and human rights with people and staff.

People were listened to when they gave feedback about the service they received. Staff spoke positively about feeling valued by management, who were always available to provide support and guidance. Systems were in place that continued to be effective in assessing and monitoring the quality of the service provided.

Further information is in the detailed findings below.

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 remained safe.	Good ●
Is the service effective? The service remained effective.	Good ●
Is the service caring? The service remained caring.	Good ●
Is the service responsive? The service remains responsive.	Good ●
Is the service well-led? The service remained well-led.	Good ●

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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 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.

This inspection took place on 07 August 2018 and was announced. We provided 48 hours' notice of the inspection to ensure management were available at their office to facilitate our inspection. 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.

Before the inspection, we reviewed information we held about the service in the form of statutory notifications received from the service and any safeguarding or whistleblowing incidents, which may have occurred. A statutory notification is information about important events, which the provider is required to send us by law. We also asked commissioning teams from local authorities and Healthwatch for any information they had, which would aid our inspection.

At the time of our inspection, the service was providing personal care for 20 people who lived in the Kington area. We spent time visiting people in their own homes and asked them and their relatives what they thought about the care they received. We also undertook telephone interviews with people and relatives to gauge their impression on the quality of care provided. In total, we spoke to five people who used the services and eight relatives.

At the office, we reviewed three electronic records about people's care and other records on how the domiciliary care agency was managed. This included electronic medication administration records, personnel and recruitment records, and quality assurance checks.

As part of the inspection, we spoke with the two registered managers for the service, and three care staff.

Is the service safe?

Our findings

People told us they continued to feel safe with staff and the services they provided. One person told us, "I have three daily calls, which are always on time. They have never missed a call even in the bad weather, when staff turned up on tractors. They have never failed to arrive. Reliability is crucial to me. They make sure I'm safe and that my safety pendent is working. They watch out for you, I can't fault them." Another person said, "I feel very safe when they help me have a bath. They stay to make sure I am safe and don't fall and then help dry me off and dress." One relative told us they believed their family member was very safe with staff, who were very well trained and knew exactly what to do. People and their relatives told us they would not hesitate to speak to staff or management if they had any concerns about their safety or wellbeing.

The provider continued to protect people from avoidable harm, abuse and discrimination. Staff had received training in, and understood, how to recognise, respond to and report abuse. They told us they would immediately report any abuse concerns to the management team. Staff were also aware of whistle-blowing procedures and felt confident raising any concerns. The registered manager understood their responsibilities in reporting and dealing with concerns to ensure people remained safe.

People told us there were enough staff on duty to respond to their individual needs and requests. People and their relatives said they received a reliable service from regular staff. One relative told us, "They are extremely reliable. Their times are perfect and they never let us down." Another relative said, "They are very punctual and never miss any calls." The provider adhered to safe recruitment practices to ensure prospective staff were suitable to work with people at the home.

Risks to people continued to be managed in a way that protected them and kept them safe from avoidable harm. One relative told us, "They [staff] have spoken to my relative about the risk of falling and they [staff] do everything they can to keep them safe. They always make sure our relative feels steady before walking." Plans were in place to ensure people were protected from risks both within the home and in respect of their care and support they received. Staff were aware of risks associated with people's care and knew the support people needed to help keep them safe. Staff said they had received guidance and training on infection control and prevention and were satisfied with the range of personal protective equipment (PPE) available.

The provider had systems and procedures in place to ensure people received their medicines safely and as prescribed. Staff received training and underwent periodic 'spot checks' to assess their continued competency.

Is the service effective?

Our findings

People continued to receive effective care and support from staff who had the skills and knowledge to meet their needs. People told us they continued to be involved in care assessments and care planning and were happy with the care and support that they received from the provider. People and their relatives still had confidence in the knowledge and skills of the staff. One person told us, "Staff have very good training and are competent." A relative said, "I think they [staff] are very well trained, professional and caring people. They look after our relative extremely well."

Staff told us communication from the provider was good. They were immediately kept up to date with any changes in risk or people's needs through the electronic care document system they used. This meant they could review people's needs on their mobile phones, before each visit. Staff we spoke with confirmed they received regular one to one supervision. They [staff] felt valued and supported by the management, who were always available to provide advice and guidance.

People's rights with regards to consent and making their own decisions continued to be respected by staff. People we spoke with confirmed that staff asked their permission prior to supporting them. Staff told us they ensured people were happy before proceeding with any support and provided reassurance while undertaking the task. Staff and the registered manager understood their responsibilities with regards to the protection of people's rights and what to do when someone may not have the capacity to make their own decisions. Staff confirmed they had training in Mental Capacity Act (MCA) and were able to describe the principles of the legislation.

Most people and relatives told us they made their own health appointments, but staff would support them with this if they asked. One person told us staff would arrange a doctor's visit as necessary."

People told us they chose what to eat, which was prepared by staff. Systems were in place to assess people's needs or if people had an identified risk associated with eating and drinking. One person told us, "They will pre-heat my meals or prepare anything I want. They are very good at checking dates to make sure the food is safe. They [staff] do encourage me to drink in order to keep me hydrated."

Is the service caring?

Our findings

People continued to experience care that was kind and caring and provided by staff with whom they had positive relationships with. One relative told us, "They are all lovely and [relative] looks forward to seeing them [staff]. They are so thoughtful and go the extra mile. They even feed the cat. They [staff] even find the time to sit and chat with our relative." Another relative said, "They are very kind and caring people. For example, during the bad weather they ploughed their way through the snow to get there." A third relative told us staff were all kind and would go the extra mile to support people.

People told us staff continued to treat them with dignity and respect. One person said, "Very much so. I feel completely at ease and relaxed with them [staff]." One relative said, "Absolutely, they [staff] are so respectful in every way. But they [staff] will have a laugh with our relative, which they like." Another relative said their loved one was treated with the utmost respect and that staff made sure they were always clean and tidy.

People felt staff understood the support they needed and encouraged them to do as much as they could for themselves. One relative told us, "They encourage our relative to walk around a little whilst they are there, but they [relative] is not able to do very much for themselves." Another relative said, "The carers take our relative to the social centre, which is their independent time." Staff we spoke with demonstrated a good understanding of people's needs and the importance of encouraging people to be independent. Staff explained how they would encourage people to do as much as they could for themselves, such as moving around their home or with personal care.

People were actively involved in identifying their needs and wishes for their own care and support. They told us they felt they were listened to by staff and the provider, who respected and acted on their requests. One relative said, "If I leave notes, as we have a note book, or anything they always take them on board. Communication is very good between everyone involved." Another relative told us, "They listen to us all. That is so important." A third relative told us that they were listened to and felt listened to by staff and the provider.

Is the service responsive?

Our findings

People received person-centred care and support that reflected their individual needs and requirements. People continued to be involved in the development and review of their care needs and were consulted if any changes were required. Where people's needs changed staff took immediate action to respond to the changes and ensured people still received personalised care. People's care plans were individual to them, included clear information about their care and support needs, and provided insight into their personal background, preferences and interests. The registered manager showed insight into the Accessible Information Standard, and we saw people's communication needs had been assessed. The Accessible Information Standard aims to make sure that people who have a disability, impairment or sensory loss get information that they can access and understand.

Staff were able to demonstrate an awareness of the need to be sensitive and considerate about issues around equality, diversity and human rights. The provider told us they were fully committed to values that demonstrated they were an inclusive service by actively promoting awareness of equality; diversity; human rights. All staff undertook equality and diversity training during their initial induction and at regular intervals throughout their employment with the provider. The provider told us to their knowledge they had not cared for a person from the lesbian, gay, bi-sexual and transgender community (LGBT). However, should that occur in the future they were confident that staff could provide person centred care to meet people's specific needs.

People and relatives said they were happy and confident to raise any concerns with the registered manager or management team. They had information, which was available in their file, on how to make a complaint and told us they knew they would be listened to. One relative told us, "I feel very able to complain, but have never needed to." Another relative said, "I would have no qualms complaining if need be, but we never have needed to." Another relative told us, "Never needed to raise any concerns at all."

During our inspection visit, the registered manager told us they were not providing end of life care for anyone at that time. The provider told us that in the event of such need, they would work closely with the person, their family, district nurses and other medical professionals to build a care plan suitable for that individual. Regular reviews would be made as the terminal phase progressed.

Is the service well-led?

Our findings

People told us that they continued to be involved in how services were provided and had been asked to comment on the care they received. People told us they had completed questionnaires about the service they received, and had commented positively about the quality of care they received. People told us the service was well-run and that the registered managers were approachable and responsive to any issues. One relative told us, "Definitely, it is well managed. It shows in the quality of staff and care they give." Another relative described the provider as, "They are very helpful. If we need to change the times for any reason they are very flexible." A third relative described the service as "very good, professional and flexible."

The service had two registered managers in post. The registered manager had been in post since September 2015 and understood their regulatory responsibilities. 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.

The provider carried out audits and checks to monitor and seek to improve the quality and safety of the care and support people received. These included routine checks on staff, where people were also asked if they were happy with the service provided. However, these were not always recorded. The registered managers assured us immediate action would be taken to ensure such checks were recorded. The management also undertook checks of medicines and reviews of care records. Monthly call-alarm checks were also undertaken.

The registered managers demonstrated a good understanding of the duties and responsibilities associated with their registration with CQC, including the need to submit statutory notifications regarding important events involving people who used the service. They spoke with passion about the care and support people received, and a continued commitment to people's wellbeing.

Staff spoke positively about the culture, and that management were approachable and listened. The felt valued and respected. One member of staff told us, "We are encouraged to speak out, and the management are always available for advice."