

Blue River Home Care Ltd

Blue River Home Care Waltham Abbey

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

Blue River Home Care Waltham Abbey is a domiciliary care service providing personal care to people living in their own homes in the community. At the time of our inspection the service was supporting eight people.

People felt safe being supported by the staff from Blue River homecare. People received support which was effective in meeting their assessed needs. Staff were kind, caring and compassionate. The service was responsive when people's needs changed and were kept under regular review. The service was well led. The registered manager led by example, and the service embraced a people first values based culture which was open, and inclusive.

This was the first comprehensive inspection since the service was registered on 05 February 2018. Why we inspected: This was a planned inspection. We inspect within a year of the service being registered.

Follow up:

We will continue to monitor information we receive about the service until we return to visit as per our reinspection programme. If any concerning information is received, we may inspect sooner.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?	Cood A
	Good •
The service was safe	
Details are in our Safe findings below.	
Is the service effective?	Good •
The service was effective	
Details are in our Effective findings below.	
Is the service caring?	Good •
The service was caring	
Details are in our Caring findings below.	
Is the service responsive?	Good •
The service was responsive	
Details are in our Responsive findings below.	
Is the service well-led?	Good •
The service was well led	
Details are in our Well-Led findings below.	



Blue River Home Care Waltham Abbey

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. This inspection was planned to check whether the provider was meeting the legal requirements and regulations associated with the Act, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

Inspection team:

The inspection was undertaken by one inspector.

Service and service type:

Blue River is a domiciliary care service providing a regulated activity of personal care to people in their own homes.

The service had a manager registered with the Care Quality Commission. This means that they and the provider are legally responsible for how the service is run and for the quality and safety of the care provided.

Notice of inspection: We gave the service 48 hours' notice of the inspection visit because it is small and the registered manager is often out of the office supporting staff. We needed to be sure that they would be available to support the inspection.

What we did:

Inspection site visit activity started on 5 February 2019 and ended on 7 February 2019. We visited the office location on 5 February 2019 to see the registered manager and office staff; and to review care records and policies and procedures. On 6 and 7 February, we contacted people, relatives, staff and professionals to seek feedback about their experience of the service.

Before the inspection we reviewed all the information we hold about the service, which included the provider information return (PIR). This is a form that the provider is required to complete which tells us about what the service does well and any improvements they plan to make in the future.

During the inspection we spoke to the registered manager (who is also the provider) and office staff, including the quality assurance manager. We spoke with one person who used the service; four relatives, four care staff and received feedback from three professionals. We looked at policies and procedures, staff recruitment records, care plans and staff training records. We reviewed other records relating to the overall monitoring of the service.



Is the service safe?

Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm.

People were safe and protected from avoidable harm. Legal requirements were met.

Safeguarding systems and processes

- •The provider had effective safeguarding systems in place and staff we spoke with had a good understanding of how to identify and report potential concerns. This helped ensure people were protected from harm or abuse.
- •People and relatives told us they felt the care and support provided was safe. One relative told us, "I have no concerns about [Name]'s safety. There have never been any incidents to concern me."

 Assessing risk, safety monitoring and management
- •People had individual risks assessed and measures were put in place to help reduce and mitigate risk. Staff understood when people required support to reduce the risk of avoidable harm. Care plans identified risks; for example, environment and individual risks to people such as mobility or use of equipment. Staffing levels
- •Staff had been recruited safely to ensure they were suitable to work with people living in their own homes in the community.
- There was sufficient staff to support the needs of each person in a timely way. People could choose the times they required support and the minimum visit duration was one hour. One person told us "The staff have plenty of time to provide a good service safely and do not have to rush."

 Using medicines safely
- •We found medicine had been managed safely. Staff had been trained in the safe administration of medicines and had their competencies checked.
- People were given time to take their medicine at their own pace, and this was recorded in the medicine administration record (MAR).

Learning lessons when things go wrong

- There had been no accidents or incidents since the service was registered. The registered manager had a process in place to record, review and reflect on accidents and incidents so that they could learn from them. Preventing and controlling infection
- •Staff used personal protective clothing when assisting people with their personal care. For example, they used disposable gloves and aprons to protect people from acquired infections.



Is the service effective?

Our findings

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

People's outcomes were consistently good, and people and relatives feedback confirmed this.

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

• People's needs had been assessed and care plans were personalised. People were given choices about all aspects of their lives. Care plans contained information about people's life histories, preferred routines, and likes and dislikes.

Staff skills, knowledge and experience

- Staff received training in various topics relevant to their roles. Staff told us they felt the training was very good and gave them the skills and knowledge they required to carry out their duties safely and effectively.
- •New staff were inducted to the service's values and culture. The induction included training and shadowing of more experienced staff. One staff member commented, "I think the induction was really helpful as I was able to observe exactly how the person liked to be supported." There was a strong framework to monitor performance.
- •Staff were supported with regular meetings and individual supervisions. Staff told us they found them useful and informative. Staff opinions and suggestions were welcomed, and staff had clear roles and responsibilities.

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

- •People were supported to eat and drink a healthy and balanced diet. If any concerns were noted such as weight loss, this was monitored. When required, health care professionals were asked for guidance. For example, if people required specialist diets, such as having a high calorie diet to maintain a healthy weight.
- The registered manager provided people with information about various food delivery services and meal options

Staff providing consistent, effective, timely care within and across organisations

•The provider worked with different health and social care professionals and organisations to ensure care was seamless. For example, they ensured people got the necessary advice on benefits and access to independent advocates.

Supporting people to live healthier lives, access healthcare services and support

- People were supported to access various healthcare professionals when required.
- •Relatives told us they were always kept informed when any health care interventions were required. Ensuring consent to care and treatment in line with law and guidance
- •People were asked to consent to their care and treatment and this was recorded in their care records. Where people had fluctuating capacity, appropriate guidance was sought from family members and professionals to help ensure the person's best interests were taken into account.



Is the service caring?

Our findings

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

People were supported and treated with dignity and respect; and involved as partners in their care.

Ensuring people are well treated and supported

- People and their relatives told us the staff who supported them were kind and caring, and always willing to do more to support them. One person's relative told us "[Name] of registered manager is a real force of nature, passionate and energetic."
- People told us they were treated with kindness and were positive about the staff's caring attitude. Another relative told us, "The staff are fantastic. Nothing is too much trouble. We have been so happy with the service and look forward to them coming."
- All the staff we spoke with were passionate about working at Blue River Home Care and it was evident that they had people at the heart of all they did.

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

• People were supported and encouraged to express their views and staff took time to discuss their preferred routine and offer choices. One person told us, "I am really happy with the support I have received. I get on well with all the carers who have come to help me. I feel that I am able to continue to be as independent as possible."

Respecting and promoting people's privacy, dignity and independence

- Staff told us they respected people's privacy, maintained their dignity and ensured they treated people in a way which they would like their loved ones to be treated. For example, one staff member told us, "We are visitors in people's homes, it is not our work environment and I make sure I respect their home."
- People's information was stored securely to maintain their confidentiality.



Is the service responsive?

Our findings

Responsive – this means we looked for evidence that the service met people's needs

People's needs were met through good organisation and delivery.

How people's needs are met

- The provider ensured care was person-centred and they took the time to gather detailed information which was used to develop people's care plans. They worked hard to understand people's needs, before the care commenced. They involved people who knew the person well in the care planning process.
- Staff were responsive towards people's needs when they changed and were kept under regular review. One person's relative told us, "They are definitely responsive, if [name] needed to see a GP, they [staff] organise it and keep me informed."
- A professional told us, "I have worked with staff from Blue River Home Care for almost one year. They were instrumental in setting up live in care for my client. They provided high quality care staff around the clock, making sure there was always cover for carer breaks and holidays. They provided invaluable support to their staff and the family."
- •Another professional told us, "The service is focused on providing person -centred care and supported people to remain independent. They also said, "Staff really understand the people well and are knowledgeable about their treatment and care."
- People felt empowered. One person told us, "I feel I am listened to and involved in planning my care." Relatives also confirmed they felt that they were listened to and that the registered manager acted to put things right if anything needed tweaking.
- •Staff knew about people's cultural and religious needs and how this may affect how they required their care. For example, when a person with specific religious and cultural needs was admitted to hospital, the care staff stayed with them to ensure their needs were met properly. Staff had received training in equality and diversity and reflected how they used this knowledge to reduce any possible barriers to care. Improving care quality in response to complaints or concerns
- •People and their relatives knew how to raise a concern; and that these would be listened to and acted upon in an open and transparent way, as an opportunity to improve the service. One relative said, "I've never made a complaint, but I would feel confident if I had to make one. I know [Name] of registered manager would take steps to resolve it immediately."
- No formal complaints had been made since the service was registered. We saw there was a robust procedure in place to investigate complaints comprehensively. End of life care and support
- People were supported with appropriate, compassionate end of life support and advanced planning arrangements had been documented to ensure people's wishes were known.



Is the service well-led?

Our findings

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

The service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

- People were at the heart of the service and staff worked collaboratively to ensure a shared vision about the ethos and culture of the service. The registered manager told us, "We are a small team, passionate about providing quality care, we work well as a team."
- •People who used the service spoke positively about the staff and the registered manager. One relative told us, "Blue River are exceptional. [Name] really looks forward to them coming. I would definitely recommend them."
- •Staff were highly motivated by the provider and registered manager and showed pride in the care they gave to people. Feedback from professionals said the registered manager was available, approachable and was really focused on providing the best care possible.
- When required notifications had been completed to inform us of events and incidents, this helped us to monitor the service.
- Managers and staff were clear about their roles, and understood quality performance, risks and regulatory requirements.
- The registered manager had created an open, transparent and inclusive culture at the service. Staff spoke positively about the management team and felt they were well supported and always available even outside office hours.
- There were a range of quality monitoring systems and processes in place. These audits had been used to review all aspects of the service. For example, people were visited at home and a quality monitoring form was completed. In addition, regular telephone monitoring calls were made to check that people were happy with the service.
- The registered manager was passionate about providing person centred care and this was reflected in every aspect of the service.

Engaging and involving people using the service, the public and staff

- People, relatives and staff all felt they were able to contribute to making improvements at the service. Continuous learning and improving care
- The registered manager had extremely high standards and was very proactive in all aspects of service delivery.
- •There was a strong emphasis on continuous improvements. The provider was receptive to feedback and demonstrated a real appetite to ensure the delivery of high quality care. This was reflected through feedback from people, relatives, staff and professionals.

Working in partnership with others

• Partnerships had been developed with health and social care professionals, and partners with community links.