

Bournemouth Rainbow Ltd

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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

Bournemouth Rainbow is a domiciliary care agency. It provides personal care to younger disabled adults living in their own houses and flats in the community. The service was registered in December 2016. We inspected the agency October 2017 but we did not rate the service because it was new and we did not have enough evidence to make robust judgements. This was the first inspection at which the service was rated.

This inspection was announced and took place on 3 and 4 July 2018. We told the provider two days before our visit that we would be coming to ensure that the people we needed to talk to would be available.

At the time of this inspection the agency was providing a service to around 10 people. However, of these, only one was receiving personal care. CQC only inspects the service being received by people provided with the regulated activity 'personal care'; help with tasks related to personal hygiene and eating. The inspection therefore focused on the care of this one person.

We spoke with the relative of this person as they themselves were not able to tell us about the care and support they had received. The relative highly valued the service provided and were very satisfied with the support their relative received.

The small team of staff employed at Bournemouth Rainbow had all been trained in safeguarding adults and were knowledgeable about the types of abuse and how to take action if they had concerns.

There had been no accidents and incidents from which any trends could have been identified and where action could be taken to reduce likelihood of recurrence.

Robust recruitment systems had been followed to make sure that suitable, qualified staff were employed in the right numbers for effective running of the service.

Assistance to the person being supported with their medicines was managed safely.

The staff team were trained so that they were equipped with the knowledge and skills for them to fulfil their role effectively.

Staff were well supported through supervision sessions with the provider, and an annual performance review.

The provider was aware of the requirements of the Mental Capacity Act 2005. The person being supported was able to give their consent.

The relative told us that the agency was very responsive and accommodating. They said their relative was treated compassionately and staff were knowledgeable about their needs.

These needs had been thoroughly assessed and a care plans put in place to. The plan was person centred, up to date and accurate.

There were complaint systems in place and the relative we spoke with was aware of how to make a complaint.

The agency was well led with the provider/manager aware of all the legislation and guidance relating to the effective running of the service.

With only a small service being provided, there was not much need for auditing and monitoring of the quality of service. We discussed the systems that would be put in place as the service develops and grows.

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.

The provider had policies and procedures in place designed to protect people from abuse and staff had received training in safeguarding adults.

Risks to people's personal safety had been assessed and plans were in place to minimise these risks.

The provider had safe recruitment procedures in place.

Medicines were managed safely.

Is the service effective?

Good ●

The service was effective

People's needs had been thoroughly assessed.

People's rights were protected with the agency acting in accordance with the Mental Capacity Act 2005.

People were supported by staff with the right skills and knowledge to meet their individual needs.

Is the service caring?

Good ●

The service was caring.

People were positive about the relationships they had with staff.

People were involved in making decisions about their care and support.

People's privacy and dignity was respected by staff who were polite and thoughtful.

Is the service responsive?

Good ●

The service was responsive.

Care plans had been developed to meet assessed needs.

The provider had a complaints procedure in place.

Is the service well-led?

Good ●

The service was well led.

People were happy with the quality of the service they received.

The provider had systems in place to monitor the quality of service being delivered.

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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 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.'

We reviewed the notifications the service had sent us since we carried out our last inspection; however, none had needed to be sent. A notification is information about important events which the service is required to send us by law.

This inspection took place on 3 and 4 July 2018. We contacted the provider two days before the inspection date to arrange the time of the visit to ensure that people we needed to talk to would be available. One inspector carried out the inspection on both days of the inspection. The first day was spent in the office with registered manager and on the second day we contacted a relative of the person receiving personal care from the agency.

We looked at the person's care and support records who was receiving personal care from the agency. We also looked at records relating to the management of the service such as, staffing schedules, staff recruitment and training records, provider's audits, policies and quality assurance surveys.

Is the service safe?

Our findings

The person receiving personal care from the agency was not able to tell us about the service they received. However, we spoke with their relative who was very happy with the agency and they had only praise for the support the agency had provided. They told us that if they were to rate the service, they would award, "... ten out of ten, for what they do".

To protect people and staff from harm as far as possible, the provider/registered manager had put the following measures in place, to minimise risks to people's health and welfare.

Staff had been trained in how to safeguard adults. The training included knowledge about the types of abuse and how to report concerns or allegations. Training records confirmed staff had completed this course and received refresher training to update their knowledge. Staff could therefore identify the signs of abuse and knew how to report possible abuse to local social services. The provider also gave a leaflet on safeguarding to the relative so that they were aware of safeguarding procedures and how to report concerns.

The provider showed us that a full risk assessment had been carried out before a package of care was put in place for the person receiving personal care. This included an assessment of the person's home environment and all the risks involved in the delivery the person's care.

The provider had procedures in place to monitor any accidents and incidents to see if there were trends where action could be taken to reduce the likelihood of their recurrence. However, no accidents or incidents had occurred.

Procedures and plans had been developed for emergency situations that included an out of hours and on-call system for people to contact should the need arise.

The agency employed sufficient numbers of staff to meet the demands of people they had contracted with to provide a service. The provider told us that they checked there was capacity within the team before new packages of care were agreed. The provider told us that there were no plans to increase the size of the agency. The relative we spoke with confirmed that visits always took place as agreed. They were very positive about the consistency of care workers who visited and their punctuality. They said that if care workers were running late they would be informed.

Recruitment procedures had been followed and all the required checks had been carried out. Records contained a photograph of the staff member concerned, proof of their identity, references, a health declaration and a full employment history with gaps explained and reasons given for ceasing employment when working in care. A check had also been made with the Disclosure and Barring Service to make sure care workers were suitable to work with people.

Medicines were managed safely. The agency only assisted the person receiving personal care with one

medicine. The responsibilities and how to assist the person were all documented within their care plan. Care workers therefore knew how to assist the person with this medicine and they had all been trained in safe medication administration. The relative we spoke with had no concerns about medicines' management.

There had been no safeguarding concerns from which lessons could have been learnt. The provider, however, was aware of the importance of learning from any incidents, should they occur.

Is the service effective?

Our findings

The provider had carried out their own assessment of the person's needs after receiving a copy of the assessment carried out by the care manager. This was to ensure that they agency could meet the needs of the person they agreed to support. The assessment comprehensively covered all needs of this person. The provider was aware of guidance that related to the care of the person supported with their personal care. They were also aware of the Equality Act and the need to ensure there was no discrimination when making care and support decisions.

Staff files containing information about their training were in place and readily available. Those we reviewed showed that newly recruited staff completed an induction training programme when they started working with the agency. This included a period of work shadowing with experienced staff. New staff completed the Care Certificate, which is a nationally recognised induction training programme. The Care Certificate is designed to help ensure care staff that are new to working in the care service have initial training that gives them an understanding of good working practice within the care sector.

Staff files also showed that people were supported by staff who received supervision through one to one meetings with the registered manager and an annual appraisal.

The way people were supported complied with The Mental Capacity Act 2005 (MCA). This provides a legal framework for making particular decisions on behalf of people who may lack the mental capacity to do so themselves. The Act requires that as far as possible people make their own decisions and are helped to do so when needed. The MCA also stipulates that when people lack mental capacity to take particular decisions, any made on their behalf must be in their best interests and the 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. The relative we spoke with confirmed that staff assisted their relative in line with the agreed care plan and that consent was always sought in the way the person was supported.

The provider had received training in the MCA and was aware of the legislation and when it applied.

The provider had good relationships with local commissioners and was aware of statutory support services, health care providers, their roles and how to contact them should a need arise.

Is the service caring?

Our findings

The feedback from the relative of the person who received a service from Bournemouth Rainbow was very positive and they were highly satisfied with the service.

They told us that the provider and the small team of staff who supported the person were all very friendly and had good relationships with their relative. They showed compassion and kindness with the person so that they looked forward to their visits.

The relative said that the provider and staff all knew the person's needs well, including their preferences, background and potential. The relative also told us that care workers were not rushed, stayed for the allocated time of visits and made sure the person was settled with things in order before leaving.

The relative told us that the staff team, as well as being friendly, were also reliable and professional. They always respected the person's privacy and dignity when supporting the person. The relative told us that his approach had led to the good relationships that had developed with care workers.

Is the service responsive?

Our findings

The provider had developed a care plan in partnership with the person and their relative. The communication needs of the person being supported had been considered and steps had been taken so that they understood and could agree to the support put in place. The relative told us that they had received an information folder that contained a copy of the care plan together with other information about the agency. The relative told us that staff always followed the support agreed in the care plan and that consistent care and support was provided. Copies of care plans and assessments were also held in the office. The care plan was up to date and reflected the care and support described to us.

The relative told us that there had never been a missed visit. They said they knew all the care workers as there was such a small team. They also told us that they were provided with a schedule sent in advance so that they knew who would be visiting.

They also said they were informed if there were any changes to a schedule, for instance in the case of staff sickness.

The relative told us that they had been given an information pack at the start of their receiving a service, was a copy of the agency's complaints policy. This clearly set out the procedure for people to follow should they feel a need to complain. The relative told us they had confidence they would be listened to should they ever feel a need to complain.

Is the service well-led?

Our findings

The service was well managed. Feedback from a relative of a person receiving a service was all very positive. The relative not only praised the care workers who visited them but were also very complimentary about the provider/registered manager.

By being such a small service, quality assurance systems to monitor and improve the quality of service being delivered, were not yet fully developed. Feedback had been gained from the one person receiving a personal care service and this had all been very positive. We discussed how, when the agency grew, quality monitoring would be measured and monitored. The provider had policies, procedures and systems ready to be enacted.

There were other systems in place to ensure the quality service was maintained, such as spot checks to people's homes to make sure visits were meeting needs and that all company procedures were being followed. The relative we spoke with confirmed that these spot checks took place.

A whistle blowing policy was in place, which was in line with current legislation and guidance.

The provider had not had to notify us about significant events, required in law, as none had occurred. We use this information to monitor the service and ensure they respond appropriately to keep people safe.