

Middleton Care Limited

Middleton Care Limited

Inspection report

6 Bridge Street
Middleton In Teesdale
Barnard Castle
County Durham
DL12 0QB

Tel: 01833640196

Date of inspection visit:
14 August 2018
15 August 2018

Date of publication:
10 September 2018

Ratings

Overall rating for this service

Outstanding 

Is the service safe?

Good 

Is the service effective?

Good 

Is the service caring?

Outstanding 

Is the service responsive?

Good 

Is the service well-led?

Outstanding 

Summary of findings

Overall summary

We inspected Middleton Care Limited on 14 August 2018. This was an announced inspection so that people could be informed that we wished to speak with them in their own homes.

Middleton Care Limited is a domiciliary care agency. It provides personal care to people living in their own homes in Middleton in Teesdale and Barnard Castle. This area includes rural villages and remote areas in County Durham. Not everyone using Middleton Care Limited receives regulated activity; CQC only inspects the service being received by people provided with 'personal care'; help with tasks related to personal hygiene and eating. Where they do we also consider any wider social care provided. At the time of inspection 78 people were receiving a regulated activity.

We inspected the service in April 2016 and rated the service as Outstanding. At this inspection we found the service remained Outstanding.

Middleton Care Limited ensured people were at the heart of their care and support. People received a high standard of person centred care by the staff and management team who were reported to be exceptionally kind, caring and considerate.

The staff team clearly knew the people they supported including their likes, dislikes and interests and life history and the service ensured a small and consistent team who lived locally worked with each person.

We saw the staff team had gone above and beyond and worked in their own time, or gone out of their way for the benefit of people using the service, to ensure their care needs had been met and to ensure they were safe during adverse weather in a rurally remote area.

People, their relatives and the staff we spoke with, told us the service was extremely well-led and managed. The management team had expanded and we saw that care staff had been given the opportunity to achieve degree level qualifications in leadership and human resources so ensure the business continued to develop and grow. Other staff we spoke with told us of the training opportunities and of overcoming their own fears of information technology by supportive one to one training and coaching.

The service continued to develop strong relationships with partners in the local community. An inventive scheme had been developed between the GP surgery and local pharmacist which meant the service checked and collected people's medicines and delivered them to them at home each week. People and families told us this had helped them immensely and gave them reassurance.

To ensure high quality care and consistency continued to be delivered, the service completed regular monitoring, spot checks and formal audits of service provision. The management team also worked alongside staff to provide support and complete additional observations of practice.

Staff received high levels of support to enable them to provide outstanding care. In depth induction training was provided upon commencing employment, which included completion of the care certificate. Ongoing refresher training, regular supervision, team meetings and appraisals were also provided. Staff members were an integral part of the service and very much involved in feedback and decision making, and without exception told us they were proud to work for Middleton Care Limited.

People told us they felt safe as a result of the care and support they received. The service had comprehensive safeguarding policies and procedures in place. Recruitment procedures were robust. The staff we spoke with said they were given enough time to travel between calls and that they worked in small local teams to ensure consistent support for people.

The medicines policy and procedure had been reviewed and updated. People we spoke with were complimentary about the support they received to ensure medicines were taken when required and as prescribed. All staff administering medicines had received training and had their competency assessed.

There were general risk assessments and appropriate health and safety measures were in place. Accidents and incidents were recorded appropriately.

The service was working within the legal requirements of the Mental Capacity Act (2005) (MCA).

The service had developed training for staff on equality and diversity. The in house trainer told us, "I go through this policy individually as it's important we respect people's beliefs and views." People's dignity and privacy was respected by staff, who demonstrated real empathy and compassion for people they supported. Throughout our inspection we witnessed a strong person led culture; staff were highly motivated and offered kind and compassionate care.

Staff were aware of confidentiality issues and were meticulous in ensuring the confidentiality procedures were followed. Documents were suitably stored in locked cabinets and computer systems were password protected.

Care plans outlined people's likes and dislikes, background, hobbies and family dynamics and were regularly reviewed. People who used the service were supported to follow their own spiritual and religious beliefs and cultural practices as outlined in their plans of care. The service had also implemented a health and well-being policy to support staff with physical and mental health support.

The service sought feedback on a regular basis and the service had received many positive comments and compliments. People told us they knew how to make a complaint if they needed to and a clear process was in place that was discussed with people on commencement of the service.

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 remains good.

Is the service effective?

Good ●

The service remains good.

Is the service caring?

Outstanding ☆

The service remains outstanding.

Is the service responsive?

Good ●

The service remains good.

Is the service well-led?

Outstanding ☆

The service remains outstanding.

Middleton Care Limited

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 14 August 2018. We gave the provider 24 hours' notice of our visit to ensure people's permission had been sought to speak with them.

We visited the office location on 14 August 2018 to see the provider and to review care records and policies and procedures. We spoke with people using the service, relatives and staff members the following day via telephone interviews.

The inspection was carried out by one adult social care inspector.

Before the inspection we reviewed other information we held about the service and the provider. This included previous inspection reports and statutory notifications we had received from the provider. Notifications are changes, event or incidents the provider is legally obliged to send to CQC within required timescales.

We also contacted the local authority commissioners for the service, the local authority safeguarding team and the clinical commissioning group (CCG). We also spoke with an occupational therapist, one of the local GP practices and a district nurse. Their views are reflected in our report.

At the time of our inspection visit there were 78 people who used the service. We also spoke with five people who used the service and three relatives. We spoke with the nominated individual, the registered manager, a director, the in-house trainer, two liaison officers and two care staff.

At the location's office we viewed a range of records about how the service was managed. These included the care records of five people supported by the service, the recruitment records of two staff members, training records, and records in relation to the management of the service including a range of policies and

procedures.

Is the service safe?

Our findings

At the last comprehensive inspection, we found the service was safe and awarded a rating of Good. At this inspection, we found the service continued to be safe.

People and relatives told us they felt the service was safe. Comments included, "Oh absolutely we feel safe, the girls are brilliant," and "Yes, they are all very careful, respectful and courteous."

Risk assessments were in place to ensure people were supported in a safe manner. We saw risk assessments were in place to cover environmental factors such as people's home environment.

The provider had systems and processes in place such as safeguarding and whistleblowing policies for staff guidance. Staff received training in safeguarding and had a clear understanding of what constituted abuse and how to report it. One staff member told us, "I would raise any concern in a heartbeat. I have reported concerns at other places I have worked but I know I would be listened to here if anything was bothering me."

The provider had a system in place for managing accidents, incidents and safeguarding and whistleblowing concerns. We saw the management team shared learning from incidents and quality checks. For example, they had implemented behaviour monitoring records when one person displayed anxious behaviour and ensured the team supporting that person met together regularly. The person's relative told us, "[Name] is now happy and well and communication with the team is really good."

Recruitment procedures were thorough and all necessary checks were made before new staff commenced employment. For example, disclosure and barring service checks ([BS]. These were carried out before potential staff were employed to confirm whether applicants had a criminal record and were barred from working with vulnerable people.

Staff we spoke with did not raise any concerns about staffing levels and timings of calls. People we spoke with said, "They are always on time and only delayed if something has happened beforehand and they let you know if that's happened."

Where staff supported people with their medicines this was managed safely. Staff had received innovative training in the safe administration of medicines that had been developed by the service and local pharmacist to mock an actual dosette box complete with 'tablets' [these were coloured sweets, sealed into the box by the pharmacy]. The management team observed staff on a regular basis to ensure their competency in supporting people with their medicines.

Infection control procedures were in place and staff had access to personal protective equipment to reduce risk of cross contamination.

Health and safety checks were in place regarding the office location for fire and electrical equipment. We saw the service shared safe ways of working with the staff team, for example a recent newsletter to the staff

team explained a way of contacting the emergency services when mobile phone reception was poor, which could be the case in this rural community.

Is the service effective?

Our findings

At the last comprehensive inspection, we found the service was effective and awarded a rating of Good. At this inspection, we found the service continued to be effective.

People and relatives told us they thought care was provided by well-trained and competent staff. Comments included, "They are all brilliant and know what they are doing" and "We had a care company before and got rid of them, we are very happy with Middleton Care, they will never get rid of us!"

People's needs were assessed and care was planned using legislation and best practice. For example, moving and handling guidelines and health and safety requirements.

We reviewed the training arrangements for the service and found staff completed regular training and refresher courses. The service now had an in house trainer who had devised some innovative training tools and offered one to one support for staff in areas such as online learning. One staff member we spoke with told us, "[Name] has encouraged me so much, I had never used a computer before and I was worried about taking the job as they mentioned the on-line learning. With the one to one support from [Name] I have completed my training and can now use a laptop and even have an email address!"

Staff felt supported and told us they received regular supervisions. The management team kept a record of supervisions and had a planner in place. One staff member said, "The team work is amazing, we meet together in our areas every 4-6 weeks so we can discuss any issues or concerns as well as our one to one meetings. The support is excellent."

Staff were aware of the Mental Capacity Act [MCA] and understood the principles of the Act. Staff we spoke with talked about ensuring people's consent was sought each time they provided them with personal care. We saw documented evidence had been sought where Lasting Power of Attorney appointees were in place or other specific statements of wishes.

Staff provided support with meal preparation and offered encouragement with eating and drinking. We saw that staff regularly liaised with health and social care professionals such as social workers, GPs, district nurses and pharmacists. We spoke with an occupational therapist who told us, "They are very responsive to my requests and I have a very positive relationship with them." The GP surgery told us, "We have nothing but praise for them, they are efficient, on the ball and the carers all know what's going on with our patients."

Is the service caring?

Our findings

At the last comprehensive inspection, we found the service was caring and awarded a rating of Outstanding. At this inspection, we found the service continued to be extremely caring.

People who used the service said, "I couldn't manage without them, I can't wait to see them come smiling through the door each day," and "Everyone is so sensitive and caring, even the girls in the office give me special support, it's wonderful."

We asked relatives of people using the service about their experiences of the care and support their family members received. Their responses were all overwhelmingly positive. Relatives we spoke with said, "They are like family to us," and "They are all brilliant so kind and caring."

Staff were exceptional in supporting people to be independent. It was a regular occurrence for staff to support people by walking their dog or taking them to the hairdressers or GP surgery. The service had introduced a scheme whereby they collected and checked people's medicines each week. They carried this out in conjunction with the GP practice and local pharmacy and this meant people and their families did not have to venture out often some distances to collect medicines. It also meant medicines could be checked by trained staff. The GP practice told us, "They care about the patients, they are very compassionate and that matters to us. We have nothing but praise for them." One relative we spoke with said, "It makes life so much easier because we are getting older too and the tablets are quite complicated. This has taken the hassle out of everything and we are so grateful." This showed that staff were committed to help people to remain independent for as long as possible and lead fulfilling lives in their own homes and local communities.

All staff we spoke with showed genuine concern for people's wellbeing. One staff member told us, "I am passionate about the clients I support, this is a close community and it means so much to everyone in it that the older people are well cared for." It was evident from discussion that all staff knew people very well, including their personal history, preferences, likes and dislikes and had used this knowledge to form very strong therapeutic relationships. One staff member told us, "The care plans here are so good, I found I learn so much about people's former lives. It gives them pride to talk with us about their past and an incentive that we are given the time to listen to their stories."

The staff we spoke with explained how they upheld the privacy and dignity of the people that they cared for and told us that this was a fundamental part of their role. One relative told us, "Everything is done with a smile and in a dignified way. We do have a laugh together but the girls are always very respectful."

During the severe winter, carers who were on holiday worked to ensure people were visited, and staff and their partners dug paths to coal bunkers and garden gates. This showed how staff went the extra mile above and beyond what was expected of them and were committed to ensuring older members of the community were kept safe at all times.

Is the service responsive?

Our findings

At the last comprehensive inspection, we found the service was responsive and awarded a rating of Good. At this inspection, we found the service continued to be responsive.

Care records were person centred, which means the person is at the centre of any care plans and their individual wishes, needs and choices are taken into account. Each person's care record included important information about the person, such as family history, things they enjoyed doing and their personal care needs. We saw these had been written in consultation with the person who used the service. Every person who used the service we spoke with felt their needs were well met and that their preferences were acted upon.

Care plans were in place and described each person's individual needs and what actions were required from staff. Records described in detail what was required from staff at each visit and specific requirements about mobility, personal care, medication, meal provision, domestic tasks, shopping and any other additional information. We saw one care plan stated, "I like to have dried cranberries and prunes on my cereal."

The management team were responsible for reviewing and updating care plans and assessments, and there was evidence that people and external professionals all had input into this. One healthcare professional we spoke with said, "They are very responsive and proactive, they will contact us if they have any concerns about a patient."

People and relatives gave positive comments about the responsiveness of the service. One person told us, "They fit in with us not the other way around and they will do anything you ask."

The provider had a complaints policy which was shared with people as part of their welcome pack.

People and relatives we spoke to said they knew how to make a complaint and felt the service would respond. One person told us, "Oh yes I know just to ring the office if I have a problem with anything."

No one using the service was currently in receipt of end of life care. However, the management team advised support would be provided when necessary and that staff would work closely with health care professionals. The service was also seeking out end of life training for the staff team where they wished to undertake this.

Is the service well-led?

Our findings

At the last comprehensive inspection, we found the service was well-led and awarded a rating of Outstanding. At this inspection, we found the service continued to be exceptionally well-led.

At the time of our inspection visit, the service had a registered manager in place. A registered manager is a person who has registered with CQC to manage the service.

Without exception every person, relative and healthcare professionals we spoke with provided excellent feedback about the provider, registered manager and office team about how the service was run. Staff were also extremely positive. One staff member told us, "Its fantastic, [Name] is a lovely boss and it's a wonderful place to work because of the people who work here, its like a family." One person told us, "[Name] the provider is just amazing, I really don't know how they do it. It's like having my own family looking after me, I really don't know what I'd do if I didn't have them."

Following the award of Outstanding at the last inspection, there had been changes to the management team to ensure the service would continue to grow and develop. The provider told us, "We said in our management meeting we can't sit on our laurels and be complacent, we need to continue to strive to be outstanding."

The service had completely revised its service user guide and care plan approach to ensure it was completely person centred as well as introducing new developments such as newsletters for both staff and people who used the service, an electronic rostering system and developing new policies to support staff in relation to health and well-being. One staff member told us, "The well-being policy is great and everyone knows about it, there should be no shame or embarrassment about having anxiety or depression. The local services to contact is also a great idea because the GP might not always be available to talk to."

The provider who had also been the registered manager chose to step back from the day to day running of the service they had set up in 2005. The senior co-ordinator, who had completed their management training to degree level since our last visit, was now the registered manager. We also met with one of the carers who had expressed an interest in human resources [HR] and had been supported to complete a two year Level 5 course in this field. They were now working three days a week as the human resources officer. They told us, "I would never have believed I could do this, I absolutely love it and have learnt so much." We witnessed their enthusiasm in sharing their training materials and policies they had developed with us.

The service was in the small town of Middleton in Teesdale and continued to serve exceptionally remote areas of Teesdale that experienced extremes of weather in 2017. This presented a variety of challenges in terms of the amenities, geography, social isolation and access to services for older vulnerable people. We were told numerous stories of staff and their partners helping to reach people who were cut off to provide care and bring essential supplies. The provider had bought all staff a voucher from a local beauty spa as a thank you for them going above and beyond to ensure people were cared for during the very harsh winter.

The vision and values of the service were clearly communicated to staff and the in-house trainer showed us their training tools which they had developed to ensure every staff member was given the opportunity to learn and develop their skills. Innovative training tools included medicine dosette boxes that the trainer had got the local pharmacy to fill with coloured sweets and seal to ensure staff were clear on checking medicines against what the person had been prescribed.

The service had excellent links with the local community, including using local facilities such as village halls to facilitate staff meetings. The office continued to act as a local hub for the care of older people in Teesdale. During our visit, a community nurse dropped in as they couldn't get access to a person's home. The registered manager called a staff member who arranged to meet the nurse at the person's home straight away and introduce them to the person as they were wary of new people. This showed the service working with others in a seamless way to get the best outcomes for people.

We looked at the arrangements in place for quality assurance and governance. The provider had a structured approach to governance and quality assurance. A regular programme of audits was carried out on care records and immediate feedback given to the staff team on any issues raised by the checks.

Feedback about the quality of life people experienced using the service was sought and regular spot checks took place on the quality and performance of the staff team working in people's homes. People and relatives told us about regular meetings and discussions with the service's management team. A family member told us, "They pop round and check that we are happy with everything, there is always someone there if we have any questions."

Every staff member we spoke with told us they were very happy working at the service. Everyone told us they were proud to work for the service and they felt valued and listened to. One staff member said, "I love working for Middleton Care, we are a team and we are friends who look after each other. The winter was terrible and we had to walk for four days to get to people as the roads were impassable. [Name] the provider bought us all a voucher for a beauty spa as she said she knew it was a difficult time. She didn't have to do that and everyone said it was a lovely gesture."

The provider was meeting the conditions of its registration and submitted statutory notifications in a timely manner. A notification is information about important events which the service is required to send to the Commission by law.