

Poole Home Care Limited

Poole Home Care Limited

Inspection report

3 Elizabeth House
40 Lagland Street
Poole
BH15 1QG

Tel: 01202022360

Date of inspection visit:
14 November 2019
15 November 2019

Date of publication:
20 December 2019

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

About the service

Poole Home Care Limited is a domiciliary care agency. It provides personal care to people living in their own homes. At the time of this inspection 45 people were receiving care and support from the service. Not everyone using Poole Home 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 take into account any wider social care provided.

People's experience of using this service and what we found

Without exception, everyone we spoke with or received feedback from was very positive about the service. This was due to excellent leadership from the registered provider and registered manager as well as committed and well trained team of staff.

People received personalised care which was responsive to their individual needs. Staff had an excellent understanding of the care and support people needed and provided this with great care and commitment.

People were encouraged and supported to eat and drink well.

People told us they felt listened to and consulted when planning and agreeing what care and support they needed.

Staff had completed safeguarding training and understood their role in identifying and reporting any concerns of potential abuse or poor practice.

Risks to people were assessed and regularly reviewed. Staff understood the actions needed to minimise the risk of avoidable harm including the prevention of avoidable infection.

Staff supported people to take medicines safely. Staff were trained in medicines management and knew how to ensure that people received their medicines on time and as they had been prescribed.

There were sufficient numbers of trained, experienced staff to meet people's needs. Safe recruitment practices were followed, and appropriate checks completed to ensure that only suitable staff were employed. The service has retained 100 % of the staff employed since the service started on 23 November 2018.

Staff received induction and on-going training and support that enabled them to carry out their roles positively and effectively.

People had access to healthcare services and were involved in decisions about their care and wellbeing. Partnerships with other agencies and health professionals enabled effective outcomes for people.

People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible; the policies and systems in the service supported this practice. People and where appropriate their relatives were involved in decisions about their care.

People, relatives and professionals told us they could confidently raise any concerns, and these were addressed appropriately.

The registered provider and registered manager continually reviewed the service and sought ways to improve the service to benefit both the people receiving the service and staff. They had built strong relationships with relevant professionals and within the local community to promote learning and meeting people's needs.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk

Rating at last inspection

This service was registered with us on 23 November 2018 and this is the first inspection.

Why we inspected

This was a planned inspection based on the service's registration date.

Follow up

We will continue to monitor information we receive about the service until we return to visit as per our re-inspection programme. If we receive any concerning information 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?

The service was safe.

Details are in our safe findings below.

Good ●

Is the service effective?

The service was effective.

Details are in our effective findings below.

Good ●

Is the service caring?

The service was caring.

Details are in our caring findings below.

Good ●

Is the service responsive?

The service was exceptionally responsive.

Details are in our responsive findings below.

Good ●

Is the service well-led?

The service was well-led.

Details are in our well-led findings below.

Good ●

Poole Home Care Limited

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 team consisted of 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. Their area of expertise was with older people.

Service and service type

Poole Home Care Limited is a domiciliary care agency. It provides personal care to people living in their own homes.

The service had a manager registered with the Care Quality Commission. This means they and the nominated individual 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. We needed to be sure that people were informed that we would be contacting them by telephone, and we needed a manager to be available to facilitate this inspection.

Inspection activity started on 14 November 2019 and ended on 22 November 2019. We visited the office location on 14 and 15 November 2019.

What we did before the inspection

We reviewed information we had received about the service since it was registered. The provider was not asked to complete a provider information return prior to this inspection. This is information we require

providers to send us annually to give some key information about the service, what the service does well and improvements they plan to make. We used all of this information to help us plan the inspection. We obtained feedback from two social care professions. Both provided very positive comments which are detailed in the main body of this report.

During the inspection

During the inspection we spoke with two people and seven relatives. We also spoke with the registered manager, the nominated individual and four staff.

We reviewed a range of records including five care plans and medicines records, five staff files, staff training records and other information about the management of the service. This included quality assurance records and audits, medicines records and maintenance of equipment.

Is the service safe?

Our findings

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

This was the first inspection since the service was registered with us, we found this key question was rated as Good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- Staff fully understood their role in protecting people from abuse and had received appropriate training on safeguarding adults. A member of staff told us, "I feel totally confident to recognise a safeguarding issue and know it would be reported to the local authority where necessary".
- The registered manager and nominated individual had a good knowledge of safeguarding and understood how to raise concerns with the local authority.
- A social care professional said Poole Homecare Limited had, "In the instance of complex family dynamics and safeguarding concerns you have acted promptly, professionally and demonstrated excellent communication with social services".

Assessing risk, safety monitoring and management

- People told us they felt safe and well cared for. Comments made included, "I've no worries about their [relative's] safety" and, "We have the same girls two or three times a week and they're all very caring. I was very worried about how I'd cope at home with my husband, but they've made it seem very easy".
- Assessments were carried out to identify any risks to people and to the staff supporting them. This included environmental risks in people's homes and any risks in relation to people's care and support needs.
- Individual risk assessments detailed the action staff should take to minimise the chance of harm occurring to people or staff. Staff understood the actions they needed to take to minimise the risk of avoidable harm.
- There was a contingency plan in place in case of events that effected the service running safely, such as staff sickness, problems with the office or adverse weather.

Staffing and recruitment

- Recruitment practices were safe. The relevant checks had been completed before staff worked with people in their homes. The service had retained 100 % of staff since they started providing the service in November 2018.
- People were supported by enough staff to meet their needs. Staffing arrangements provided the flexibility to meet people's changing needs whilst ensuring consistent care.
- One person said, "Communication was good between the service and clients, for example if the support worker was held up in traffic the client would receive a phone call keeping them informed and they all have contact numbers for Poole Homecare".
 - The service had introduced an incentive for existing staff who had 'referred a friend' that had been recruited and completed their probationary period.
- Rotas showed suitable times for travelling between visits was included. The registered manager said they

and the nominated individual drove between each visit to ensure there was sufficient time. Staff confirmed they were able to request additional travel time if this wasn't the case.

Using medicines safely

- People received their medicines when they were needed and in ways that suited them. There were systems in place to ensure this was done safely. One relative said, "Medicines are always collected from pharmacy and thought goes into any pain relief and creams that might make dads life a bit more comfortable" and, "The systems that was put in place for medication were easy to follow and daily records were kept on all actions, which I found reassuring".
- People had their medicines administered by staff who had completed safe management of medicines training and had their competencies checked regularly.

Preventing and controlling infection

- People were protected from the risk of infection because staff were trained in infection control.
- Staff told us they were supplied with personal protective equipment (PPE) for use to prevent the spread of infections and were clear on their responsibilities with regards to infection prevention and control. Staff were able to collect PPE from a stock held at the office.
- A relative said, "As far as personal care goes, dad has never been so clean, his clothes are regularly washed, and he always looks dapper."

Learning lessons when things go wrong

- Accidents, incidents and complaints were recorded and reviewed for themes that might suggest further action was required.
- Accidents and incidents were seen as an opportunity to reflect on practice and continually improve outcomes for people.
- Lessons learned were shared with staff through team meetings or supervision as appropriate. Weekly newsletters included 'gentle reminders' for staff. A member of staff said, "This helps keep me up to date".

Is the service effective?

Our findings

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

This was the first inspection since the service was registered with us, we found this key question was rated as Good. This meant people's outcomes were consistently good, and people's feedback confirmed this.

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

- People's care needs, and choices were assessed before the service started to provide any care or support and were then regularly reviewed. A relative said, "At first mum had been using a stand aid but they re-assessed her and found she wasn't safe anymore so then went over to hoisting which is better for her".
- Assessments had been completed in line with current legislation, standards and good practice guidance and the information was used to create person centred care and support plans.

Staff support: induction, training, skills and experience

- People told us their needs were met by staff with the right skills, experience and attitude for their roles. Comments received included, "Dad has a great team of carers. They know dad and his little ways."
- People and their relatives described staff as being knowledgeable and professional.
- An ongoing programme for updates and refresher training was in place. Staff had opportunities for career development such as moving and handling train the trainer qualification. Staff told us, "I did manual handling and all the other mandatory training courses also, Mental Capacity Act and dementia awareness" and, "I did a lot of training and already have my NVQ 2, 3 and 4." And, "All the staff have different knowledge bases and we complement each other".
- When we asked people about staff training, one relative said, "Definitely, I work as a carer so I can tell. It's the way they use the hoist properly for example."
- Staff completed a comprehensive induction and did not work unsupervised until they and the management team were confident they could do so. A member of staff said, "I shadowed people for a week and could have done it for longer if I'd wanted to."
- Staff said they felt well supported by their manager and told us they had regular supervision meetings which allowed them to discuss their performance, concerns or training and development needs.

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

- People were supported by staff who understood their food and drink needs and preferences. People and relatives told us staff provided support where necessary. A relative told us, "Meals are always well presented and a lot of thought goes into what he might enjoy. Suggestions are given to me about foods that might work well for him and keep him healthy. He is assisted to eat and drink." Another relative person said, "Another thing I like is that they always make sure he's [relative] drinking enough. One of the carers suggested a type of water bottle that my husband might find useful. They even got one for us."
- Care plans reflected the support the person needed to eat and drink.
- Staff had received training in how to support people with eating and drinking.

Staff working with other agencies to provide consistent, effective, timely care. Supporting people to live healthier lives, access healthcare services and support

- Collaborative working with other agencies, such as GPs and district nurses, had ensured effective care and improved people's quality of life. A social care professional stated Poole Homecare Limited, "Directly request Occupational therapy / GP involvement as required in a timely manner".
- Staff spoke knowledgeably about people's health needs and records showed they had been proactive in seeking guidance and support from health professionals. A person said, "I wasn't feeling well the other day. The carer said shall I ring your G.P for you? I said no thanks I'll ring my daughter in law which I did. They checked later that I was alright".
- People were supported to access healthcare services when they needed this. This included support from GP's and community nurses, a person told us the staff "Called my doctor, nurses when and if necessary."
- People told us this was done in a timely way and records showed that instructions from healthcare professionals were carried out.
- One social care professional described Poole Homecare Limited as being, "Very supportive in terms of supporting the hospital team in assessing clients very promptly and supporting with a timely discharge from hospital."
- The service ensured people were informed, such as sharing information about their entitlement to have a second black bin at the property for continence products. The nominated individual stated "Its little things like this that we advise family members / service users on that is appreciated as we find its the small things that can make the big differences".

Ensuring consent to care and treatment in line with law and guidance

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.

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. When people receive care and treatment in their own homes an application must be made to the Court of Protection for them to authorise people to be deprived of their liberty. We checked whether the service was working within the principles of the MCA.

- Staff knew about people's individual capacity to make decisions and understood their responsibilities for supporting people to make their own decisions.
- People told us they were encouraged to make decisions for themselves and felt involved in making choices wherever possible.
- People had signed their care records to show that they consented to the care and support they were being provided with.
- Training records showed staff had undertaken training in relation to the MCA.

Is the service caring?

Our findings

Caring – this means we looked for evidence that the service involved people and treated them with compassion, kindness, dignity and respect.

This was the first inspection since the service was registered with us, we found this key question was rated as Good. This meant people were supported and treated with dignity and respect; and involved as partners in their care.

Ensuring people are well treated and supported; respecting equality and diversity

- People, their relatives and health and social care professionals spoke highly about how caring and supportive the service was. Comments made included, "Provide excellent care." And, "Enthusiastic in what they do and show their passion to do a good job." And, "You do actually 'care'." And, "They support my mum brilliantly and are flexible, approachable and more than anything show kindness, reassuring me that even though I am not around a lot, she is in good hands." A social care professional described how the service, "Have gone the extra mile on many occasions and have always shown great compassion and kindness." Relatives' said, "[registered manager's name] and the carers treat mum as though she's their own mum, they're so caring."
- Staff understood and respected people's lifestyle choices. When we discussed with staff the people they supported, they demonstrated an open, non-judgemental attitude that respected people's diversity.
- Staff had developed positive relationships with people and their relatives and spoke about people in ways that demonstrated they cared for them.

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

- Everyone we spoke with felt included in how their care and support was planned and delivered. They confirmed they had opportunities to have their opinions heard.
- If people needed independent support with making decisions, the registered manager had information available about advocacy services.
- People's cultural and spiritual needs were respected. People were asked about their beliefs and practices during their assessment, these were recorded in their care plans.

Respecting and promoting people's privacy, dignity and independence

- Everyone we spoke with confirmed staff were respectful of their privacy, dignity and independence. Comments made included, "I can't thank them [staff] enough, they always greet us with a smile and are extremely discrete and professional." And, "Personal care was done in a very sympathetic, dignified way, they always pull the blind down." A relative said "Without your help (Poole Homecare Limited) we could not have continued with her care at home as long as we did. It was her wish to be independent and you facilitated that for her".
- Dignity, Respect and Equality was discussed during staff meetings.
- People were supported to be as independent as possible. Care plans reflected what people were able to do for themselves and how to encourage them to do this.
- Regular spot checks on staff considered how they respected and promoted dignity, such as closing

curtains when providing personal care.

- People's personal information was kept secure and staff understood the importance of maintaining secure documents and care records to ensure people's confidentiality was maintained.

Is the service responsive?

Our findings

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

This was the first inspection since the service was registered with us, we found this key question was rated as Good. This meant people's needs were met through good organisation and delivery.

Planning personalised care to ensure people have choice and control and to meet their needs and preferences

- People said staff provided them with the care and support they required; they told us they felt well cared for. One person said, "Always accommodated our needs and been very flexible when we have needed you." And, "It's been uplifting to visit [relative] and find the staff have washed and set her hair. Mum, who hasn't taken to accepting care easily, has even been appreciative." A social care professional told us the service had supported a person to return home from hospital sooner by giving flexible payment terms. This had a hugely positive impact on their emotional wellbeing and rehabilitation.
- The staff team were knowledgeable about people's personal history, which enabled them to have meaningful conversations. All staff confirmed that care plans and other records contained sufficient detail to enable them to meet people's care needs.
- Care plans were personalised and detailed clearly how the person wanted their needs and preferences met. Each person's plan was regularly reviewed and updated to reflect their changing needs.

Meeting people's communication needs

Since 2016 onwards all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard (AIS). The standard was introduced to make sure people are given information in a way they can understand. The standard applies to all people with a disability, impairment or sensory loss and in some circumstances to their carers.

- People's communication needs were assessed and detailed in their care plans. This set out the person's preferred method of communication, any impairments that could affect communication, and guided staff on the best ways to communicate with them.
- Documents could be adapted to suit people's needs, such as larger print.

Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities that are socially and culturally relevant to them

- The service supported people to achieve their wish, for example one person who was going to be alone on Boxing Day and wanted to go to Poole Quay. Staff arranged for a wheelchair to enable the person to get there with staff support. The person was extremely grateful to the service for making this possible. Photographs showed how happy the person was.
- The service provided a free compassionate care service for those who don't have the extra support at home once the care calls have been carried out. People and relatives used the service for a variety of reasons such as for respite for loved ones, visits to a coffee shop, for people just wanting to get out the house, shopping trips and taking pets to the vets. This was very beneficial to people and relatives.

Improving care quality in response to complaints or concerns

- Everyone we spoke with knew how to make a complaint and the service had a complaint policy and procedure in place. One person complimented the service by stating, 'On the few occasions when we had an issue, and these were far and few, the manner in which you responded was reassuring. Not only were you receptive but we were able to contact you easily and get the matter resolved swiftly and efficiently'.
- The service had a record of complaints which showed the registered manager had acknowledged and resolved issues to people's satisfaction.

End of life care and support

- The service was not supporting anyone with end of life care needs at the time of our inspection.
- Although assessments included people's wishes for the end of their life, care plans didn't include people's plans or preferences. The registered manager said this was mainly due to people's families knowing their loved ones wishes. However, they would ensure care plans reflect people's preferences from now on.
- Staff said they had received training in end of life care, which would be refreshed if someone using the service was nearing the end of their life.
- The service arranged cover for carers to attend the funeral of a person they had supported. There were service of thanksgiving / remembrance displayed to remember people who had received the service. The registered manager said the service kept in contact with relatives and contacted them frequently to 'stay in touch'.

Is the service well-led?

Our findings

Well-Led – this means we looked for evidence that service leadership, management and governance assured high-quality, person-centred care; supported learning and innovation; and promoted an open, fair culture.

This was the first inspection since the service was registered with us, we found this key question was rated as Good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

- The values of the service, commitment, attention to detail, respect and extra mile were promoted and monitored through meetings, spot checks and supervision. A person told us, "I am very content with the service. Carers are trustworthy, show a caring and professional manor. Always willing and very helpful. Another person said "I cannot speak highly enough of them".
- Poole Homecare Limited were finalists for the homecare provider of the year Daily Echo 'Proud to care' award.
- The service offered a complimentary care scheme. This was to provide people receiving the service up to two hours free 'sitting service' to be used in case of emergency. People had used it to enable their relatives to attend appointments or an event such as a funeral and be assured the person was being looked after whilst they were away.
- People, relatives and staff expressed confidence that the service was well run. Comments made included; "Thoroughly professional, caring and genuinely nice group of people." "In fact you always gave 120% as an organisation to support not only the clients but the family members too." "They are all brilliant, absolutely lovely. Nothing is too much trouble for them." "I would wholly and unreservedly recommend your organisation to any person looking to engage a care provider." "I would highly recommend their service to anyone who wants peace of mind in the care of their loved ones." A social care professional stated, "I have only ever received positive feedback from your clients and their families".

How the provider understands and acts on the duty of candour, which is their legal responsibility to be open and honest with people when something goes wrong

- The registered manager promoted the ethos of openness and learning from mistakes. This reflected the requirements of the duty of candour. The duty of candour is a legal obligation to act in an open and transparent way in relation to care and treatment.
- The registered manager showed us accident and incident reporting processes that included prompts for appropriate reporting to other agencies such as safeguarding and the health and safety executive.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements

- People and staff told us the registered manager and nominated individual were very approachable, professional, knowledgeable, caring and very 'hands on,' and that they would have no hesitation in raising concerns or making suggestions.

- The registered manager and nominated individual continually monitored the quality of the service provided to people, be it in person during visits or at people's reviews. A person said, "The owners both come in and work with the carers regularly, to see if everything is alright and if we are happy". This meant they were continually checking to ensure that people received the best possible care and support.
- Records of staff meetings, quality assurance and audits showed that when issues were identified, these were shared appropriately and action was taken to address any shortfalls.
- Spot checks were carried out to ensure staff were following their training and meeting people's needs. A member of staff told us, "We are regularly monitored to see if we are following policy and care plans. Feedback is always helpful."
- Legal requirements, such as notifying CQC of significant incidents, were met.
- There were plans in place for unexpected events, this included a Brexit contingency plan.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- People were encouraged to express their views and suggestions about the service via face to face meetings with staff, surveys and reviews of their care. This information was used to improve the service and to highlight good practice or care.
- Relatives described the registered manager and nominated individual as being, "Hands on managers/owners as well. I like that, they don't just stay in the office but work with the carers sometimes. They know what needs doing by working with mum and the carers" and "They have been very helpful to us and have given advice when asked. I can't praise the company enough they were a life saver to me. Before I would be in tears but now, I can relax as know mum is being cared for properly."
- Staff said they felt comfortable to put forward any ideas they may have to improve the care, support or wellbeing for people and were confident these would be acted upon. "There's a weekly newsletter that goes out to staff, who can ask questions about something and we can put a reply in the newsletter."
- Staff spoke positively about teamwork. The service had introduced an award for employee of the month. This was based on feedback from people using the service, and the member of staff received £50.00. We saw several examples of staff being 'praised and thanked' for their work. Staff described how this made them feel appreciated and valued.
- A member of staff said, "The thing I like about the agency is that they keep us updated. We are kept up to date with any changes in client's condition/needs. We get text messages if we are out. As employers their strongest point is that they have an open-door policy, we can talk to them any time about any concerns." Another member of staff said "I've found Poole Homecare very open and welcoming. Its hard work but enjoyable and I feel supported".

Continuous learning and improving care

- There was a process of continual improvement and quality assurance in place. There was a variety of audits completed to ensure the quality of the provision was maintained.
- There was evidence of learning from incidents. Investigations took place and appropriate changes were implemented.

Working in partnership with others

- The service had established good working relationships with health and social care professionals. This enabled the service to ensure the best possible outcomes for the people they supported. A social care professional described the service as, "Always provided a prompt and reliable service. Poole Home Care has a very family based feel and the support you provide is very personalised."
- The registered manager liaised with other registered managers, as opportunities to share best practice and was looking into attended local provider events.

