

Bloomscare Ltd

44 MacDonald Avenue

Dagenham Essex RM10 7DJ

Inspection report

44 Macdonald Avenue
Dagenham
RM10 7DJ

Tel: 02085952179
Website: www.bloomscare.uk

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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

We expect health and social care providers to guarantee people with a learning disability and autistic people respect, equality, dignity, choices and independence and good access to local communities that most people take for granted. Right support, right care, right culture is the statutory guidance which supports CQC to make assessments and judgements about services providing support to people with a learning disability and/or autistic people.

About the service

44 MacDonald Avenue Dagenham Essex RM10 7DJ is a supported living service which is registered to provide personal care. The service can support up to three people. At the time of the inspection, they were supporting one person, who was receiving personal care. CQC does not regulate premises used for supported living; this inspection looked at people's personal care and support.

The service also provides domiciliary care to people in their own homes. Not everyone who used the service received personal care. CQC only inspects where people receive personal care. This is help with tasks related to personal hygiene and eating. Where they do we also consider any wider social care provided. At the time of this inspection there was one person using the domiciliary service.

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

Right Support

The supported living service was able to demonstrate how they were meeting the underpinning principles of Right support, right care, right culture. This enabled people who used the service to live as full a life as possible and achieve the best possible outcomes.

There was a positive relationship between people and the staff who supported them. People were treated with respect and their independence, privacy and dignity were protected and promoted. They were supported to be involved in their care planning and making decisions about their care in a way that suited their needs. Care was provided with kindness and compassion. Confidentiality of people's personal information was maintained.

Right Care

Before people started using the service, an initial assessment of their needs was undertaken. Care plans provided detailed information about each person's care and support needs. People were supported to take part in activities within the service and in the community. They maintained relationships with friends and relatives.

The provider had safeguarding policies and procedures in relation to safeguarding people. Staff understood what abuse was and the actions to take if a person using the service was being abused. There was guidance for staff on how to manage risks to people and how to keep them safe. There were sufficient staff to meet

people's needs and recruitment processes were safe. People were protected from the risks associated with the spread of infection.

Staff received appropriate training and professional development to effectively meet people's needs. People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible and in their best interests; the policies and systems in the service supported this practice. Where people did not have the capacity to consent, the staff acted in accordance with legal requirements. People were supported to maintain good health.

Right culture

People and their relatives felt the service was well managed and staff felt supported. There was an effective quality monitoring system to check that the care met people's needs. Regular audits took place and any issue identified was acted on to ensure the service was managed well. The provider worked with a number of health and social care professionals to ensure people's needs were met.

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 3 December 2019 and this is the first inspection.

Why we inspected

This was a planned inspection because the service had not been previously rated.

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 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 ●

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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. We checked whether the provider was meeting the legal requirements and regulations associated with the Act. We looked at the overall quality of the service and provided a rating for the service under the Care Act 2014.

Inspection team

The inspection was completed by an inspector.

Service and service type

This service provides care and support to people living in a supported living setting, so that they can live as independently as possible. People's care and housing are provided under separate contractual agreements. CQC does not regulate premises used for supported living; this inspection looked at people's personal care and support.

This service is also a domiciliary care agency. It provides personal care to people living in their own houses and flats.

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 24 hours' notice of the inspection. This was because we wanted to make sure someone would be available to support us with the inspection.

What we did before the inspection

We reviewed information we had received about the service. We used the information the provider sent us in the provider information return (PIR). This is information providers are required to send us annually with key information about their service, what they do well, and improvements they plan to make.

During the inspection

We reviewed a range of records. This included two people's care records, three staff files, training records, staff supervision records and satisfaction surveys. We also looked at audits and a variety of records relating to the management of the service, including policies and procedures. We spoke with the registered manager and one member of staff.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We spoke with one person who used the service and one relative to obtain their views of the service. We also contacted two members of staff to ask them questions about their roles and to confirm information we had received about them during our inspection. We received limited feedback from people who used the service due to their communication needs.

Is the service safe?

Our findings

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

This is the first inspection for this newly registered service. This key question has been rated Good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- The provider had safeguarding and whistleblowing policy and procedures in place. People told us they experienced safe care. One person told us, "It is a safe place, I do feel safe."
- Staff had received safeguarding training. They had a good understanding of what they needed to do to ensure people were safe from harm. One member of staff told us, "I will report any abuse to the manager."
- Relatives told us they felt their loved ones were safe using the service. One relative said, "I do not have any concern when the carers are around."
- The registered manager knew of their responsibilities to protect people from abuse. We noted they had reported safeguarding concerns to the local authority and these were investigated and lessons learned from them. We noted safeguarding was discussed during staff supervisions and also during staff meetings.
- Staff were aware of whistleblowing policy and knew how to raise concerns about any unsafe practice.

Assessing risk, safety monitoring and management

- The provider had detailed risk assessments in place to ensure care and support was planned and delivered in a safe way. People were supported by staff who understood how to provide safe care and reduce risks.
- Risk assessments gave staff clear guidance on how to support people safely. For example, people who were at risk due to their physical health or their medical conditions, they had a risk assessment in place. Risk assessments were reviewed regularly to ensure they were accurate.
- The registered manager carried out an environmental risk assessment of people's homes, which ensured information was available to staff for minimising risks and hazards when they were working in people's homes.
- Checks were also done on the premises and equipment to ensure health and safety of people, staff, and visitors to the service. For example, we noted there was an up to date gas safety certificate as well as a satisfactory electrical wiring certificate.

Staffing and recruitment

- The provider had an effective recruitment procedure to ensure suitably qualified and experienced staff were employed. Relevant checks had been completed before staff worked at the service. Staff files included application forms, copies of passport or driving licence, references, health checks and criminal record checks.
- There were sufficient numbers of staff available to meet the needs of people. The same staff or group of staff visited people who used the service or cared for people in the supported living service. This helped with continuity of care and consistency.

Using medicines safely

- The service had suitable arrangements in place to protect people using the service against risks associated with the unsafe management of medicines.
- The registered manager informed that none of the people using the service required assistance with medicine management. Staff had received training in the management of medicine, should they have to support people with medicines.

Preventing and controlling infection

- The provider had policies and procedures regarding the prevention and control of infection and kept themselves updated with relevant national guidance.
- Staff were supplied with personal protective equipment (PPE) such as gloves, masks, and aprons to protect the spread of infection.
- Staff had received training in infection control and they were regularly tested for COVID-19.

Learning lessons when things go wrong

- The provider had a system in place to record and monitor accidents and incidents. The registered manager investigated any incidents and accidents and put steps in place to prevent them from happening again.
- Accidents and incidents were shared with staff. Lessons learnt were discussed with staff during handovers and team meetings.

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 is the first inspection for this newly registered service. This key question has been rated 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

- Prior to a person starting to use the service, the registered manager carried out an initial assessment to ensure they could meet them and determine if they can support them effectively.
- The registered manager gathered information from people and their relatives about the person's health, physical, social, psychological and cultural needs so that care plans reflected how the person wanted to care and support them.
- People and their relatives were involved in the assessment process. Information was also obtained from the placing authority.

Staff support: induction, training, skills and experience

- Staff received appropriate professional development and training to help meet the needs of people who used the service. People told us that staff were responsive to their needs. One person said, "The staff are good and they look after me well."
- Staff had received training in moving and handling, infection control, medicine management, person centred care, mental capacity act, equality and diversity and safeguarding. One staff member told us, "The training is very good, and this helps in my role."
- The service had an induction programme for all new staff. The induction covered a number of areas, which included staff roles and responsibilities and key policies and procedures. Staff would shadow an experienced member of staff until they were confident to work on their own.
- Staff received regular one to one supervision with the registered manager. They told us that they found those meetings very helpful. This helped the registered manager to continually monitor and review staff performance and attitude towards people using the service.

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

- Staff supported people to ensure they ate and drank adequate amounts where this was part of the care plan.
- Staff knew what people liked to eat, including likes and dislikes. They prepared food according to people's needs and wishes. One member of staff told us, "[Person] likes to eat crisps." Where people were able, staff encouraged them to cook their meals under supervision.

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

- The registered manager had regular contact with other health and social care professionals to ensure people's needs were met fully.

- Staff monitored people's health and welfare and reported any concerns to the management team. We saw records where the registered manager requested a replacement of a certain aid for one person to help them transfer more easily thus reducing the risk of fall.

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, and whether any conditions on authorisations to deprive a person of their liberty had the appropriate legal authority and were being met.

- The registered manager and staff understood the importance of people having the right to make their own decisions. They were aware of what to do to ensure people's rights were protected.
- Staff received training on the MCA and they told us if there were concerns about people's capacity, they would refer it to the appropriate professional for an assessment. There were policies and procedures for them to follow.
- Staff told us they always made sure they sought the consent of the person before providing any care and support to them. One member of staff said, "I always ask the client [person] for their consent before I do something. I check with them first."

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 is the first inspection for this newly registered service. This key question has been rated 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 and their relative gave us positive feedback about the service and the staff. One relative said, "It is a good agency." Relatives felt staff treated people with respect and were kind and caring. Staff had developed a positive caring relationship with people who used the service.
- Staff were aware of people's beliefs and cultural needs and ensured these were met. People were not discriminated against their gender, disability, sexual orientation, religion, belief, race and age. One member of staff told us, "I treat everyone (people) the same regardless of their abilities or religion."

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

- People were encouraged to express themselves and make as many decisions as they could. They were involved in deciding how their needs should be met. Where people were not able to do so, their relatives were involved.
- Staff encouraged people to exercise their choice in areas such as how they wanted to be supported, what they liked to eat or drink and what activities they wanted to take part in.
- Records showed that people were involved in making decisions about their care and support. They had signed their records indicating their involvement and approval.
- Relatives told us they were able to discuss any issues with a member of staff or the registered manager.
- Staff knew people well. They were aware of their wishes and preferences. This helped them to ensure people's individual needs were met.

Respecting and promoting people's privacy, dignity and independence

- People were treated with respect and their privacy was upheld. Staff told us they always checked before providing personal care and ensured people were happy to continue. They were able to tell us how they would maintain a person's privacy and dignity when assisting them with personal care. This included closing curtains and doors.
- People were supported to maintain as much independence as possible and make choices such as what they wanted to wear, eat, drink and how people wanted to spend their day. For example, staff told us that during personal care they encouraged people to wash parts of their body by themselves if they were able to do so.
- People's right to confidentiality was protected. Staff were aware of confidentiality around supporting people in the service and in the community. They told us information provided to them in confidence should not be used or disclosed except to another authorised person. They also mentioned they would seek the person's consent first before any information was shared.

Is the service responsive?

Our findings

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

This is the first inspection for this newly registered service. This key question has been rated 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

- The feedback we received from people and relatives about the care and support provided by staff was positive. One relative said, "The staff are very good."
- People received personalised care that was responsive to their needs. We saw that the care plans provided staff with detailed guidance about how people's needs should be met. Staff told us the care plans provided them with enough information to enable them to meet people's needs.
- Care plans were kept under review to ensure staff continued to meet people's changing needs. This was done with the involvement of people who used the service and their relatives.

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 recorded in their care plans. Where people had limited verbal communication, staff knew how to communicate with them, for example, by using simple sentences.

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

- People's social and emotional needs were taken into account. People were able to take part in activities and lived their lives how they wanted.
- Staff supported people to access local communities such as going shopping. They also encouraged people to keep in touch with their relatives. People were supported by staff to remain active and do things they enjoyed.

Improving care quality in response to complaints or concerns

- The service had a complaints procedure that was clearly written and easy to understand. People and their relatives knew that they were able to express any concerns to the registered manager. One relative told us "If I have any concerns, I will speak with the manager."
- There was a system in place to record any complaints or concerns received. This included the details of the concern, actions taken and the outcome. At the time of the inspection, the service had not received any complaints. The service had received a number of compliments from relatives and other professionals.

End of life care and support

- The registered manager informed that none of the people using the service required end of life care at the time of our inspection. However, staff were trained to ensure people received the care and support they wanted when approaching the end of their lives.

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 is the first inspection for this newly registered service. This key question has been rated 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

- People and their relatives told us the management team were approachable and included them in discussions about their care. People told us they were happy with the service provided. One person told us, "I am happy here."
- The registered manager operated an open-door policy. Staff told us the registered manager was very supportive and listened to their views. One staff member said, "The manager is good and supportive, you can discuss things with them, they will listen to you." Staff were encouraged and felt comfortable to voice their views.

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 was aware of their responsibility to inform CQC of events and incidents that happen within the service. They kept us up to date with any changes that happened at the service. Staff were also kept informed about matters that affected the service.

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

- Staff were clear about their responsibilities, expectations and culture and values of the service. They understood their roles and felt supported.
- Staff had access to a range of policies and procedures on how the service needed to be run safely and effectively. They told us communication between them, and the registered manager was good.
- The registered manager had kept us informed about certain events, so that we could see the actions they had taken. They had provided with further details if we needed to follow up on any information they had sent to us.

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

- The provider had systems in place for people and their relatives to give feedback about their experiences of using the service. The registered manager acknowledged good practice and addressed any areas of improvement where needed.
- The provider continually sought feedback from people, relatives, staff, and other professionals. People and their relatives were given a feedback form at regular intervals so they could share their opinion of the

service received. We looked at the latest completed forms, we noted the feedback received were positive about the service as well as the staff.

- There were regular staff meetings where there were discussions about the service and about people needs. Staff were encouraged to share ideas and discuss any issues they might have during those meetings.
- Meetings were also held on a regular basis with people who used the supported living service. This gave people an opportunity to discuss any issues they might have.

Continuous learning and improving care

- The registered manager carried out regular audits to ensure the service was running smoothly. Checks were carried out in areas such as care plans, health and safety and staff training.
- They also undertook spot checks with staff so they could directly observe them while they were providing care and support to people. They recorded their observation and this information was held in staff files. The outcome of the spot checks were also fed back to staff as part of their development. This helped to ensure staff provided care and support to people to the required standard.

Working in partnership with others

- The provider had good links with the wider community and worked in partnership with other agencies to help ensure a joined-up approach to people's support. They acknowledged the importance of developing close ongoing professional relationship with individual professionals.
- The registered manager kept themselves up to date with best practice on health and social care. They attended regular meetings with other providers and managers within their area to share ideas regarding how they managed their services and where improvements could be made.