

Beaumont Home Care Limited

Beaumont Home Care

Inspection report

Unit 1C, Little Hyde Farm
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Tel: 01277725660

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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

About the service

Beaumont Home Care provides personal care and support to people who require assistance in their own home. At the time of our inspection seven people were being supported by the service. 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.

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

We received positive feedback on the service. One person said, "The registered manager is very kind, considerate and passionate about the service and the staff always go above and beyond for us."

Care and treatment was planned and delivered in a way that ensured people's safety and welfare. People were cared for and supported by staff who had received appropriate training. They were systems in place to minimise the risk of infection. There were safe medicine procedures for staff to follow.

Staff had a good understanding of people's preference of care. Staff promoted people's independence.

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.

People were supported to eat and drink enough to ensure they maintained a balanced diet. People and their relatives were involved in the planning and review of their care. The registered manager had effective policies to respond to complaints and these were handled well.

The provider had monitoring systems in place to ensure they provided good care, and these were kept under regular review.

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

The service was registered with us on 9 June 2021 and this is their first inspection.

Why we inspected

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

Follow up

We will continue to monitor information we receive about the service, which will help inform when we next inspect.

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 ●

Beaumont Home Care

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 Health and Social Care Act 2008.

Inspection team

The inspection was carried out by one inspector.

Service and service type

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

Registered Manager

This service is required to have a registered manager. A registered manager is a person who has registered with the Care Quality Commission to manage the service. 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.

At the time of our inspection there was a registered manager in post.

Notice of inspection

We gave the service 48 hours' notice of the inspection. This was because it is a small service and we needed to be sure that the provider or registered manager would be in the office to support the inspection.

Inspection activity started on 15 September 2022 and ended on 22 September 2022. We visited the office on 16 September 2022.

What we did before the inspection

We reviewed information we had received about the service since registering. We sought feedback from health professionals. 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. We used all this information to plan our inspection.

During the inspection

During the inspection we spoke with two people and three relatives. We spoke with four members of staff including the registered manager and nominated individual. The nominated individual is responsible for supervising the management of the service on behalf of the provider. We also received feedback from one health professional.

We reviewed a range of records. This included four people's support plans. We reviewed four staff records in relation to training and supervision and a variety of records relating to the management of the service.

Is the service safe?

Our findings

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

This is the first inspection of 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

- People were kept safe from avoidable harm because staff knew them well and understood how to protect them from abuse. People we spoke with told us they felt safe using the service.
- Staff had received training in safeguarding and knew how to raise any concerns. Staff told us, "I know how to report any form of abuse and I would take immediate action. I would know who to report to and I would continue to escalate until I needed to."
- The registered manager understood their legal responsibilities to protect people and share important information with the local authority and CQC. There were no open safeguarding incidents at the time of our inspection.

Assessing risk, safety monitoring and management

- Risk assessments had been completed to provide staff with guidance on how to keep people safe and minimise risks.
- Risk assessments were reviewed and remained up to date to meet people's needs and reduce risks.
- People's care records helped them get the support they needed. Staff kept accurate, complete, legible and up-to-date records, and stored them securely. The registered manager told us, "I involve families and health professionals when formulating and reviewing the care plans and work closely with them on a regular basis."

Staffing and recruitment

- There were enough staff to support people's needs. A relative told us, "Staff always turn up on time and we have never had a cancelled, missed or late visit."
- The numbers and skills of staff matched the needs of people using the service.
- Staff recruitment and induction training processes promoted safety. The registered manager told us, "We ensure all staff carry out their induction and continue to shadow until they are confident." Staff confirmed the induction had been extensive and offered an opportunity for shadowing until they were confident which prepared them for their job.

Using medicines safely

- People were given their medicines safely and as prescribed, and it was recorded on their medicine administration record.
- Staff did not support people with medicines until they had completed the required training, medicine competency assessments were seen on staff files.
- Risk assessment and care plan documentation were in place to ensure safe administration.

Preventing and controlling infection

- Staff had received training in infection prevention control and were provided with the appropriate personal protective equipment (PPE). Staff told us they had enough PPE available and what they were required to wear.
- Risk assessments were in place for people to mitigate risks from infections.
- Staff were tested for COVID-19, consistent with government guidance.

Learning lessons when things go wrong

- People received safe care because staff learned from lessons.
- The service managed incidents affecting people's safety well. Staff recognised incidents and reported them appropriately and the registered manager investigated incidents and shared lessons learnt. Staff told us, "I know how to report an incident." The registered manager told us, "I speak to staff during team meetings and supervisions and discuss any issues or incidents to share information with them."
- We reviewed one incident and saw it had been recorded with action taken and information shared with another organisation where an error had occurred.

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

- Before people began using the service, a comprehensive assessment of people's needs and choices was carried out by the registered manager. This was then the basis of an agreed plan of support. A person told us, "The registered manager sat with us and we discussed my [relative's] support needs. They kept us involved at all times and listened to what we had to say."
- People had support plans that were detailed, personalised and reflected a good understanding of people's needs. Likes, dislikes and interests were listed and there was detailed guidance for staff on how to manage behaviours and health conditions.
- Support plans were reviewed regularly, or if there was a change in people's care and support needs.

Staff support: induction, training, skills and experience

- Staff were up to date with their mandatory training. Some staff had completed additional courses which were specific to people's needs.
- Staff were supported to complete the Care Certificate as part of their induction along with other courses to gain specific knowledge skills they may need to provide care. The Care Certificate is an agreed set of standards that define the knowledge, skills and behaviours expected of specific jobs roles in health and social care.
- Staff were supported with a full induction when they first started working at the service. One member of staff told us, "After I completed my induction, I was introduced to the people I would be supporting and spent a lot of time doing shadow shifts so I could get to know them well."
- Staff received support in the form of continual supervision, appraisal and recognition of good practice. A member of staff told us, "The registered manager is always carrying out spot checks. They are always there to support and supervise me on a regular basis."

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

- People received support to eat and drink enough to maintain a balanced diet. Details of nutrition and hydration were seen in people's care plans.
- One relative told us, "My [relative] is always offered a choice with their meals but also encouraged to eat healthy food which is important."

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

- The service worked closely with health and social care professionals to help support people to maintain their health and wellbeing. The registered manager told us they made referrals to external professionals

when appropriate.

- Staff had practical information to support people with their healthcare needs. Support plans contained prompts and guidance for staff on action to take, should a person become unwell.

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 MCA 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.

- Staff understood the principles of the Mental Capacity Act (2005) and how to support people to make decisions for themselves when they had capacity.
- The registered manager gained consent from people to have their care delivered and this was recorded in their care notes.

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 received kind and compassionate care from staff who used positive, respectful language which people understood and responded well to. A person told us, "[Staff] always go above and beyond and are amazing. I have no complaints. They are extremely kind, considerate and very caring."
- Staff were focused and attentive to people's emotions and support needs. A person told us, " My [relative] has benefitted so much from the care they provide. The care they provide is exemplary. The carers are very supportive. I have so much confidence in them."
- Staff were able to tell us about people's preferences and how they like to be supported. One staff told us, "[Person] doesn't like talking about the royal family so I tried very hard to keep them away from the television this week."
- Feedback from relatives and people was positive about how caring staff were. A relative told us, "Staff are consistent and know exactly how to care for my [relative]. The registered manager is very caring and treats us like family. My [relative] is always very happy and staff always talk to them with respect and keep them involved."

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

- The registered manager worked closely with people and their relatives to ensure their care was tailored to match their needs and we saw evidence of this in their care plans.
- People, and those important to them, took part in making decisions and planning of their care and risk assessments. A relative told us, "They have always involved us in all aspects of care planning. My [relative] has input all the time and they really do listen. My [relative] has a dog and a carer occasionally comes in early to take the dog for a walk which is lovely and so thoughtful."
- The registered manager had tools in place to gather feedback such as surveys for relatives and people to complete on their experience of care.
- A relative told us, "We were all asked to part of their selection process for staff and invited to meet potential staff members and ask questions and give our feedback. This made my [relative] feel so valued and we are grateful to have been given this opportunity."

Respecting and promoting people's privacy, dignity and independence

- The service ensured the person's confidentiality was always respected. Records were kept securely. Each staff member had their own login details to any information stored electronically.
- Staff treated people with dignity and respect. A relative told us, "Staff are always patient, kind and caring. They are very considerate and supportive. My [relative] enjoys going to the Church every Sunday and they encourage them to go and attend the service every week."

- People had the opportunity to develop and gain independence. A relative told us, "My [relative] would've had to move into a residential home if it wasn't for Beaumont Home Care. The support they provide my [relative] in their own home is brilliant and we have so much confidence in the staff."

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

- Staff provided people with personalised, proactive and co-ordinated support in line with their care plans. People's care plans contained in depth information about their needs, including essential information relating to health, communication, likes and dislikes.
- People were supported by a small team who knew them well and how they like to be supported. One relative told us, "Staff are extremely patient and always speak to my [relative] with respect. They are so attentive to all my [relative's] needs, they are just amazing."
- People's care was reviewed regularly, and people had the opportunity to shape the service they received. The registered manager told us they regularly amend or update the care plans with families as and when required.
- People gave consent to their care notes being shared with family.
- A relative told us, "My [relative] used to live alone and I used the care app to read the detailed daily notes to see how my [relative] was feeling. The staff captured all my [relative's] feelings and emotions and it was lovely to read."

Meeting people's communication needs

Since 2016 all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard. The Accessible Information Standard tells organisations what they have to do to help ensure people with a disability or sensory loss, and in some circumstances, their carers, get information in a way they can understand it. It also says that people should get the support they need in relation to communication.

- People's communication needs were assessed, and staff had the information they needed to communicate effectively with people.
- People's care plans were written in practical, plain English.

Improving care quality in response to complaints or concerns

- There was a policy on how to manage and record complaints.
- At the time of our inspection the service had not received any complaints or concerns. There was a process for complaints to be logged on the system and the registered manager could audit these on a monthly basis.
- People, and those important to them, could raise concerns and complaints easily and staff supported them to do so. Families confirmed they were aware of the procedure, "I have never had to raise a complaint,

but I know who I would need to speak to if did have to and I know the manager would take it very seriously."

End of life care and support

- The registered manager was aware of the importance of documenting discussion about end of life care so staff could understand and comply with people's wishes. Information relating to end of life care was seen in people's support plans.
- The service was not supporting anyone with end of life care at the time of the inspection.

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

- Both the registered manager and nominated individual worked hard to instil a culture of care in which staff truly valued and promoted people's individuality, protected their rights and enabled them to develop and flourish. A relative told us, "The registered manager is very passionate about their role and it is evident how much they care. I have a lot of faith in the way she is managing the service"
- Management were visible in the service, approachable and took a genuine interest in what people, staff, family and other professionals had to say. A member of staff said, "My manager is incredibly supportive, and they always listen and are approachable. I can't fault them for anything."
- Families told us the service was open to suggestions. A relative told us, "The manager is always available for us to contact and is always offering support which means we have less to worry about. It gives us such peace of mind knowing how much they care about our [relative]."
- Managers worked directly with people and led by example. Staff told us, "My manager often carries out spot checks and gives me the opportunity to regularly discuss anything I need to with them. My manager may have to pick up a call if we are not available so they know exactly what the job involves and supports us as best they can."

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; 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 provider was aware of their responsibilities in relation to duty of candour. Duty of candour requires providers to be open and transparent with people who use their services and other people acting lawfully on their behalf in relation to care and treatment.
- Services that provide health and social care to people are required to inform the Care Quality Commission (CQC), of any important reportable events. The registered manager was aware of their responsibilities and had systems in place to report appropriately to CQC.
- The registered manager had the skills, knowledge and experience to perform their role. They had a clear understanding of people's needs and maintained oversight of the services they managed. There was an effective quality audit system in place which included a daily notes audit which correlated to daily note records.
- Staff were committed to reviewing people's care and support on an ongoing basis as people's needs and wishes changed over time.

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

- People, and those important to them, worked with the registered manager and staff to develop and improve the service. One relative told us, "The manager is regularly obtaining feedback and suggestions and always listens to what we have to say."
- The registered manager had systems in place for staff to share information and had frequent contact with staff to gain feedback on the care they were providing. A staff member told us, "We all meet as a team with the manager often and we work together like a family. The manager regularly shares any guidance or feedback with us."
- Staff meetings were held monthly. We reviewed minutes and saw they included updates about people who used the service as well as reminders about trainings.

Continuous learning and improving care; Working in partnership with others

- The provider had a clear vision for the direction of the service which demonstrated ambition and a desire for people to achieve the best outcomes possible.
- The registered manager had systems in place to review care and was developing audits to better monitor and evaluate outcomes for people.
- The registered manager had joined networks with other health professionals where they shared ideas and information on the care system, in order to drive continuous learning and improvement in the service.