

Bethel Healthcare Services Ltd

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Inspection report

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Date of inspection visit:
20 July 2017

Date of publication:
04 August 2017

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

This announced inspection was carried out on 20 July 2017. Bethel Healthcare Services Ltd provides support and personal care to people living in their own homes. On the day of the inspection visit there were three people using the service who received personal care.

The service had a registered manager in place at the time of our inspection. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.

People were supported by staff who understood the risks they could face and knew how to keep them safe. People were supported by regular members of staff who they knew. People who required support to take their medicines received assistance to do so when this was needed.

People were provided with the care and support they needed by staff who were trained and supported to do so effectively. People's care and support was provided once consent had been obtained in line with the relevant legislation.

People were cared for by staff who understood their health conditions and ensured they had sufficient to eat and drink.

People were treated with respect by staff who demonstrated compassion and understanding. People were provided with the care and support they required. People were informed on how to express any issues or concerns they had so these could be investigated and acted upon.

People used a service which was flexible in accordance with their needs. The registered manager provided leadership that gained the respect of staff and motivated them. There were systems to monitor the quality 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 was safe.

People felt safe using the service because staff looked for any potential risk of abuse or harm and knew what to do if they had any concerns.

People's care and support was managed by staff who were aware of the possible risks to their safety.

There were sufficient and suitable staff employed.

People received the support they required to ensure they took their medicines as prescribed.

Is the service effective?

Good ●

The service was effective.

People were supported by a staff team who had been trained and supported to meet their needs.

People's right to give consent and make decisions for themselves were encouraged.

People were supported to have sufficient to eat and drink. Staff understood people's healthcare needs and their role in supporting them with these.

Is the service caring?

Good ●

The service was caring.

People were cared for and supported by staff who respected them as individuals.

People were involved in shaping the care and support they received.

People were shown respect and courtesy by staff visiting them in their homes in a way that suited them.

Is the service responsive?

Good ●

The service was responsive.

People were involved in planning their care and support and this was delivered in the way they wished it to be.

People were provided with information on how to make a complaint.

Is the service well-led?

Good ●

The service was well led.

People had opportunities to provide feedback regarding the quality of care they received and about their involvement with the care agency.

People were supported by staff who were motivated to carry out their duties to the best of their ability.

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Detailed findings

Background to this inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection was planned to check whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

This inspection took place on 20 July 2017 and was unannounced. The inspection was carried out by one inspector.

Prior to our inspection we reviewed information we held about the service. This included information received and statutory notifications. A notification is information about important events which the provider is required to send us by law. We contacted some other professionals who have contact with the service and asked them for their views.

During the inspection we spoke with one person who used the service and three relatives. We also spoke with three care workers and the registered manager.

We considered information contained in some of the records held at the service. This included the care records for three people, staff training records, three staff recruitment files and other records kept by the registered manager as part of their management and auditing of the service.

Is the service safe?

Our findings

People and relatives we spoke with told us they, or their relation, felt safe using the service and they were treated well by the staff who visited them. One person told us, "Yes I do feel safe." A relative said, "I am confident [relation] is in safe hands when I am at work."

Staff were able to describe the different types of abuse and harm people could face, and how these could occur. They described indicators that could signify a person had been abused, such as a change in a person's usual behaviour or having unexplained marks or bruising. Staff told us they knew where and how to report any concerns. Staff told us they would report any concerns they suspected or identified during a visit to the registered manager, but they said they had not needed to do so.

The registered manager confirmed staff had received training on safeguarding and said they discussed with staff their responsibilities in reporting any concerns. The registered manager said they felt confident that staff would report any concerns they identified. The registered manager told us they had not had any concerns they needed to report but would not hesitate in doing so if the need arose. The information needed to contact the relevant local authority was on the office notice board.

People were provided with safe care and support by staff. A relative told us staff were, "Very good at sticking to the rules and regulations." They also said their relation was encouraged to use a walking frame. Another relative told us how staff provided their relation with safe care.

Staff told us they encouraged people to be safe in their daily routines and had been given information from healthcare professionals about how to support people safely. One staff member told us they had been trained to support one person with a medical procedure and that they felt "confident" in being able to do this. They also said that the registered manager had, "Made sure I was confident before leaving me." The registered manager said they observed staff providing people with support, such as with their mobility, to ensure this was done safely.

People's care files contained risk assessments that identified risks people could face and how these risks could be minimised. Staff were aware of the practices they needed to follow. There was also an environmental risk assessment to ensure the care people required could be provided safely.

People received their care and support at the time this was planned for from staff they knew and saw on a regular basis. One person told us, "I have about three different carers, they are all competent." A relative told us their relation had, "One main carer and others fill in when they are off duty." Relatives also said that staff arrived on time for their relation's appointments. The registered manager said they had the number of staff they needed to provide the service they had arranged. They said that they would increase the staffing as they took on new clients, but they would do this carefully as they did not want to expand too quickly.

People were supported by staff who had been through the required recruitment checks to preclude anyone who may be unsuitable to provide care and support. These included acquiring references to show the

applicant's suitability for this type of work, and whether they had been deemed unsuitable by the Disclosure and Barring Service (DBS). The DBS provides information about an individual's suitability to work with people to assist employers in making safer recruitment decisions. The recruitment files showed the necessary recruitment checks had been carried out.

People were encouraged to manage their own medicines, but support was provided to people if they required it to ensure they took their medicines as prescribed safely. A relative said staff, "Help [relation] sort out their pills." Another relative told us their relation required staff to support them take all of their medicines and they had needed to be trained in order to do this due to the way these were administered.

Staff said they had received training on the safe handling and administration of medicines and had been observed supporting people with these by the registered manager. There were completed assessments of staff providing medicines support in their staff files.

Is the service effective?

Our findings

People were cared for and supported by staff who had the skills and knowledge to meet their needs. One person we asked if staff seemed to be trained to provide them with the support they needed replied, "I think so." A relative shared this view and said, "Yes they seem to be." Another relative said that staff were "very competent" at supporting their relation and had been trained specifically in order to meet some of their needs. A third relative said, "They seem to be (trained) [Relation] is very happy with them."

Staff told us they were provided with the training and support they needed to carry out their work. One staff member described having an induction when they started which included working alongside another staff member. They told us that this had, "Shown me the ropes, I found it very helpful. I was nervous but [name] showed me how to do it."

Staff told us about other training they had undertaken, which included the provider's mandatory training in areas such as infection control and food hygiene. The manager showed us staff training certificates for recent training for the Care Certificate staff had attended. The Care Certificate is a set of national standards for staff working in health and social care to follow and equip them with the knowledge and skills to provide safe, compassionate care and support.

Staff spoke of having discussions about their work which provided them with support and guidance. The registered manager told us they met with staff regularly to discuss their work and undertake observations of their practice.

A person who used the service confirmed that they were always asked by staff for their consent before they were provided with any care or support. Another person's relative told us that staff, "Always had a word with them first." Staff told us they obtained people's verbal consent before providing them with any care. One staff member said, "It is important to ensure they are comfortable and consenting to what I am going to do."

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.

The registered manager told us there was not anyone who used the service who did not have the capacity to make decisions and consent to their care for themselves. They told us they had a procedure in place to follow if they suspected someone did not have the capacity to make a decision, which followed the requirements of the MCA.

When needed people were provided with the assistance they required with their nutritional support. A relative told us that a staff member would help their relation prepare a ready meal. The relative told us their

relation had commented they appreciated how staff always presented this nicely on a plate. They said, "Little things like that make the difference and make it more appealing for them." Another relative said their relation did not need support with preparing a meal but staff did sometimes make their relation a drink if they wanted one.

Staff told us they did not provide a lot of nutritional support and when they did people ate this independently. One staff member told us a person they supported had not been eating well, but they had showed them how they liked their food prepared and they now prepared it in the way they liked this. The staff member said the person was now eating well and liked the food they prepared for them. The registered manager said they monitored people's weight and would introduce food and fluid monitoring if this was needed. They also told us that they knew how to make a referral for further nutritional support if needed.

People were supported by staff who understood their healthcare needs and knew how to support them with these. A person told us that they believed staff understood their needs and always asked them how they were feeling. A relative told us they felt staff "kept an eye" on how their relation was feeling.

Staff told us they understood people's healthcare needs and could tell if someone was not feeling well. They spoke of working with healthcare professionals who were also supporting people they cared for. One staff member told us they "know what to look for" with regards the health needs of a person they supported. Staff also spoke of carrying out observations when providing people with personal care for any indications of a health concern.

The registered manager told us they liaised with healthcare professionals as and when required. They said this had been positive and had led to them having equipment and support they needed as well as any health related concerns they raised being responded to promptly.

Is the service caring?

Our findings

People who used the service and their relatives described all the staff as caring and showing a genuine interest in their wellbeing. One person told us they saw the staff who visited them as "genuinely caring people". A relative said, "My [relation] is happy with them that the main thing. They are compassionate and caring"

Staff told us they enjoyed their work and found it rewarding. They spoke of how they valued being able to help people stay at home and helping people face "difficult times". The registered manager spoke of having a "very caring staff team". They told us they looked for staff who displayed these values during their interview. The registered manager said they encouraged staff with these values when they joined the staff team.

People were involved in planning their care and support and making decisions about this. Relatives we spoke with confirmed their relations had been involved in deciding what care and support they would be provided with.

Staff told us people made the decisions about their care and support. One staff member said the person they supported, "Decides exactly what they need. I ask them what they want, they get to decide exactly what they want." Another staff member told us they knew the person they supported liked to be clean and smart and they had "taken that on board". The registered manager told us they involved people in completing their care plans and listened to how they wanted things to be done. They said people were asked if anything needed changing, adding or doing a different way and they could vary times to suit the person.

Staff told us no one who used the service at present had the support of an advocate, but said they would direct anyone to this support if they needed this. Advocates are trained professionals who support, enable and empower people to speak up about issues that affect them.

People who used the service were treated with respect by staff who were polite and respectful. A person who used the service told us staff were "brilliant" and they felt they were respected at all times. A relative said, "They are very good at that (showing respect)."

Staff described how they conducted themselves in a respectful way when in people's homes and respected their thoughts and beliefs. One staff member said, "I always try to maintain the standards [name] expects and they are always very appreciative of that." The registered manager told us that promoting people's privacy and dignity was of "paramount importance" and they checked staff were following good practices regarding this.

Is the service responsive?

Our findings

People received the care and support that had been planned for them and this met their needs. A person who used the service told us their needs were being met and they were very happy with how this was done. Relatives also felt their relations needs were being met, one said staff, "Keep on top of everything." Another relative told us their relation "needs a lot of prompting and encouragement" which they said staff provided.

People's care plans described the support they required and provided staff with guidance on how to provide this. A relative told us the registered manager, "Went through what they can and can't do" with them. Other relatives spoke of staff writing down what support they had provided to their relations to show they had received the care and support they needed.

Staff told us how they referred to people's care plans and risk assessments so they knew about their needs and how to support them safely. They also said they were able to communicate with relatives by leaving messages in the care plan when needed. Staff spoke of providing a social aspect to their visits which they said people appreciated. One staff member said they enjoyed discussing a person's interest with them, which they enjoyed telling them about.

The registered manager told us they responded promptly to any referral and put a care plan into place. They said they ensured staff knew what care and support people needed and how this should be provided. We reviewed people care plans and commented to the registered manager that although these did describe the support people required they could contain more detail to ensure staff knew exactly how people wanted to be supported. The registered manager said they would include more detail in people's plans. The registered manager also told us that the length of people's calls was based on the support they had been assessed to need.

People were provided with information on what to do if they had any concerns or complaints with the service. One relative told us, "There is a number in the book if I need it." Relatives said they had not raised any concerns but were confident these would be addressed if they did.

Staff knew about the complaints procedure and said there was a complaints form in people's care folders. Staff said they would ensure complaints were passed onto the registered manager and one staff member said they would assist a person to complete the complaints form if needed. The registered manager said they ensured people knew how to raise any concerns when they started to use the service but nobody had done so.

Is the service well-led?

Our findings

People felt the service was well run and had a positive culture. A person who used the service said they were happy with everything and thought the service was managed well. A relative said as far as they were concerned the service was "well run" and added, "There have not been any problems up till now." Relatives also commented that they found it easy to contact the office if they needed to. One relative said, "There is always someone at the other end of the phone if I need anything."

Staff told us they found the service to be well run and they felt valued. One staff member said, "It is a good agency to work for, they ensure the clients get the support they need and staff are treated fairly." Another staff member told us, "I really feel valued." The registered manager said they spoke with staff regularly on the phone and saw them when they were undertaking people's calls. They said they had arranged a recent staff meeting where they had discussed if there was any additional support staff needed and any challenges they faced. A staff member told us they felt their input was "really valued".

Staff said that any resources they needed, such as personal protective equipment (PPE), were available in people's homes. A staff member said they had contacted the registered manager when supplies of gloves were getting low in one person's home and they had brought some more out the same day. Staff said they could always contact the registered manager if they needed any advice or support. Staff were aware of their duty to pass on any concerns externally should they identify any issues that were not being dealt with in an open and transparent manner, this is known as whistleblowing and all registered services are required to have a whistleblowing policy.

People were confident in the way the service was managed and had confidence in the registered manager, who they saw on a regular basis. A relative told us they felt staff were well supported and that the paperwork was kept up to date. Staff said they felt able to discuss things with the registered manager who listened and offered support. The registered manager told us they had direct contact with all the people who used the service and visited them regularly in their homes.

The provider complied with the condition of their registration to have a registered manager in post to manage the service. We found the registered manager was clear about their responsibilities, including when they should notify us of certain events that may occur within the service. Our records showed we had been notified of events in the service the provider was required to notify us about.

The registered manager described how they ensured people were satisfied with the care and support they received. This included discussing this with them when they undertook their care calls and completing a survey from. We saw a sample of completed forms which all contained only positive comments about the service people received and the staff who provided this. One relative had written, "Everyone is very caring and thoughtful to our needs."

The registered manager completed monthly audit checks to ensure everything was running well and to identify if any improvements needed to be made. They said they read through records made in people's

homes when they visited to ensure these were being completed correctly and people were receiving the care they required. A record was made of any incident that occurred and we saw staff had called the paramedics to attend to one person following a fall.