

Mrs Susan Jayne Wright

SJW The Wright Care

Inspection report

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Ratings

Overall rating for this service

Outstanding 

Is the service safe?

Good 

Is the service effective?

Good 

Is the service caring?

Outstanding 

Is the service responsive?

Outstanding 

Is the service well-led?

Outstanding 

Summary of findings

Overall summary

About the service:

SJW The Wright Care is a domiciliary care agency that provides personal care and support to people in their own property in the community. At the time of this inspection 24 people were using the service for personal care needs.

People's experience of using this service:

The management team and staff were outstanding at caring and this was evident in the whole ethos of the organisation.

People received high quality person-centred care from staff who knew people exceptionally well. We received numerous accounts of how staff had gone above and beyond in their caring role.

The provider was especially flexible in meeting people's rapidly changing needs to ensure they remained in their homes rather than in health or social care settings. The service ensured people's families were supported too and feedback from them was very moving. Care plans were superbly written and ensured people received care and support exactly as they wished.

The service had developed excellent relationships with a wide range of community partners from the fire service to local charities and they played a very active role in ensuring older people were a valued part of their community.

People and staff told us they felt safe at the service. People received support to take their medicines safely. Risks to people's well-being were recorded and updated when their circumstances changed. Staffing was provided at safe levels that enabled people to go out and access the community when they chose to with support.

People's rights to make their own decisions were respected. People were supported to access healthcare services if needed. Staff received training according to their preferred learning style and appropriate skills and knowledge to deliver care and support in a person-centred way.

The service had a management team who had a clear vision about the person-centred care they wanted to provide. The service had a number of quality assurance systems in place and there was a focus on continuous development.

Rating at last inspection: Good (report published July 2016).

Why we inspected: This was a planned inspection based on the rating at the last inspection.

Follow up: We will monitor all intelligence received about the service to inform the assessment of the risk

profile of the service and to ensure the next planned inspection is scheduled accordingly.

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

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 exceptionally caring.

Details are in our Caring findings below.

Outstanding ☆

Is the service responsive?

The service was exceptionally responsive.

Details are in our Responsive findings below.

Outstanding ☆

Is the service well-led?

The service was exceptionally well-led.

Details are in our Well-Led findings below.

Outstanding ☆

SJW The Wright 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 as part of our regulatory functions. This inspection checked 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.'

Inspection team: One inspector and an Expert by Experience carried out this inspection. An Expert by Experience is someone who has used or supported someone to use this type of service for older people in the community.

Service and service type: SJW The Wright Care is a domiciliary care agency which provides personal care to people living in their own homes.

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. The registered manager was also the owner and Nominated Individual of the service.

Notice of inspection: We gave the service 48 hours' notice of the inspection visit because we needed to be sure someone was at the office location.

What we did: Before inspection we reviewed information we had received about the service since the last inspection. This included details about incidents the provider must notify us about, such as serious injuries or death; and we sought feedback from the local authority and professionals who work with the service. We used the information the provider sent to us in the Provider Information Return (PIR). This is key information providers are required to send to us about their service, what they do well, and improvements they plan to make.

We spoke with 17 people who used the service, and their relatives, via telephone interview. We met with one relative to ask about their experience of the care provided. We spoke with five members of staff including the deputy manager, care co-ordinator, care quality assessor and two care workers. We also received feedback from four community health and social care professionals who work with the service.

We reviewed a range of records. This included four people's care records, records relating to the management of the service and their policies and procedures.

Is the service safe?

Our findings

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

People were safe and protected from avoidable harm. Legal requirements were met.

Systems and processes to safeguard people from the risk of abuse.

- People told us they felt safe with the staff that supported them. One person said, "I have complete confidence in the carer's ability to make sure I am safe."
- There were effective safeguarding processes in place. Staff had a good understanding of safeguarding. They understood their responsibilities for keeping people safe and the processes for reporting any concerns they had. One staff member told us, "I would reassure the person and report to the managers straight away. I know they would deal with it."

Assessing risk, safety monitoring and management.

- Risks to people were assessed, recorded and updated when people's needs changed.
- People's risk assessments covered their health and care needs.

Staffing and recruitment.

- Recruitment procedures were followed. Applicants' suitability was assessed thoroughly before being offered a job. We recommended that the provider ensures interview records are maintained going forward as these were not readily available in all files we viewed.
- People received care and support from suitably skilled and experienced staff.
- People and relatives told us that the right amount of staff attended their homes at the right times and stayed for the right amount of time. One relative said, "If my relative's carer is running late, someone from the office always calls, but it doesn't happen often. We've never had a single missed call."

Using medicines safely.

- The provider continued to manage medicines safely.
- Staff completed safe handling of medicines training; other checks were completed to ensure they were competent to give people medicines.
- People told us staff took their time when administering medicines and they got them at the right times.

Preventing and controlling infection.

- Staff followed good infection control practices and used personal protective equipment (PPE). One person told us, "The staff usually bring plenty of gloves with them and they change them umpteen times whilst they are here."

Learning lessons when things go wrong.

- When something went wrong action was taken to ensure that lessons were learnt to help prevent the risk of recurrence.
- Accidents and incidents were recorded and investigated thoroughly.

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.

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 needs were assessed to identify how their care and support should be provided.
- Assessments of people's needs were thorough and people's goals or expected outcomes were identified. The assessment also considered people's religious, cultural or spiritual needs.

Staff support; induction, training, skills and experience.

- Staff were well supported and received the training they needed. One new staff member told us, "The training has all been delivered really well, the sessions were long enough and it was about real situations so you could ask questions not just online learning."
- Training, supervision and appraisals were planned and all staff said they felt they had the skills and support to carry out their roles.

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

- Eating and drinking care plans were personalised; They included details of people's preferred way of being supported, such as what food people liked and how they liked to eat it. One relative said, "The carers prompt [Name] to make sure that they are making their meals regularly. They remind them of the use by dates of items in the fridge and offer to help with a shopping list."

Supporting people to live healthier lives, access healthcare services and support.

- Support plans noted any support people needed with their health care and relevant professionals' guidance for staff.
- Staff supported people to attend health care appointments when appropriate.
- Staff understood people's healthcare needs and acted appropriately when they recognised changes in people's health. One relative told us, "They are always very quick to let me know if they have any concerns about their health or welfare."

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 with appropriate legal authority. We checked whether the service was working within the principles of the MCA, whether any restrictions on

people's liberty had been authorised and whether any conditions on such authorisations were being met.

- No one using the service was subject to any restriction of their liberty under the Court of Protection, in line with MCA legislation.
- Staff had a good understanding of the MCA and their responsibilities. Staff understood the importance of gaining a person's consent before providing any care and support.

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.

People were truly respected and valued as individuals; and empowered as partners in their care in an exceptional service.

People told us the service was extremely caring. One person told us, "They go out of their way to make sure everything is as it should be. Nothing is ever too much trouble." One relative told us, "The wonderful staff are all very professional and compassionate and can never be accused of only doing what's required of them. I see above and beyond on a regular basis." Staff spoke with compassion about people and the service, comments included, "I aim to walk away from every person knowing I have given them the best care they deserve."

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

- Staff were exceptionally caring. All staff members spoke passionately about the importance of supporting people in a compassionate way.
- The management team knew people very well and demonstrated that they were very caring individuals. One relative told us, "[Name] the deputy manager rang me the other morning to say that the carers had reported a water leak. She knew being so far away I wouldn't be able to do anything about it. She arranged a reputable plumber and it was fixed that same day. It's extra bits like this that just show me how caring the agency really are." The deputy manager spoke of the importance of striving for a caring service, "We want to be the most person-centred service we can."
- The senior management demonstrated that they cared about the wellbeing of their staff. We were given numerous examples from staff about how the service had helped them work with caring commitments and also was a supportive ear for them to turn to with any issues or worries.
- People received care and support which reflected their diverse needs. One person had written a compliment praising how the service had assisted them to gain professional healthcare advice. This led to counselling to address issues they only felt comfortable with discussing with the staff member. Staff respected people's individual needs and preferences.
- Staff valued the safety of people. One relative said, "When things went wrong, they waited at the house until I turned up, they wouldn't leave. They sat me down and made me a coffee. If it wasn't for them caring, I don't know how we would have coped."

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

- The service cared and valued the thoughts and views of people who used the service. One relative told us, "My relation is quite fussy about how they like things to be done and I know the carers are very good and they must sometimes think it's a bit strange that they do things the way they do, but it shows me that they really care and want to ensure that they are happy with everything." Another family member said, "Initially, my parents were reluctant to have people coming into their home several times a day. They had no prior experience of care provision. This reluctance was very quickly overcome by SJW using a relatively small

number of individuals to provide consistency in care, and to quickly build up good relationships between my parents and the carers."

- People told us they received support from a small consistent staff team. One person told us, "We can't praise [Name] staff member highly enough, she is like a daughter to us now and our faces light up every morning when she comes in to help." People received rotas each week so they knew exactly who would be visiting and when.
- Relatives were encouraged to be actively involved in the care of their family member. Feedback was actively sought and acted upon as needed. One relative told us, "We have regular meetings when the deputy manager will come out and we will sit and go through the care plan to see what changes are needed and I am given the opportunity to ask questions or tell them what I'm happy or not so happy about."

Respecting and promoting people's privacy, dignity and independence.

- People experienced very positive outcomes in relation to being comfortable with the support provided. One relative told us, "[Name] told me they like the carers, saying they treat them with care, dignity and compassion. Yet they have a few amusing moments which eased a difficult situation." We saw one staff had sent an email to the office saying they had gone shopping for a person's cats as their food supplies were running low and they didn't want them to go without before the person's usual shopper was due to visit again. This showed the compassionate nature of the staff team.
- Staff supported people with their personal care and encouraged people to have as much independence and control as possible. One relative told us, "I can always hear them talking to [Name] and even though they have Alzheimer's they carry on having a normal conversation with them as if they didn't. I've never heard them talking over them or talking about other things at all."

Is the service responsive?

Our findings

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

Services were tailored to meet the needs of individuals and delivered to ensure flexibility, choice and continuity of care.

Planning personalised care to meet people's needs, preferences, interests and give them choice and control.

- People received excellent person-centred care which was an integral part of the ethos for the whole service. People and relatives felt listened to and their views respected. One person told us, "I was fully involved in putting the care plan together. It lives in this blue folder and it's reviewed regularly by the deputy manager, my family and the carers." Another family member told us, "SJW have been extremely responsive in listening to and understanding the needs of my parents. They have liaised closely with other members of the family and medical professionals, and have provided clear advice and suggestions where appropriate. Their communication with the family has been excellent."

- Care records reflected that staff knew people very well. They were superbly written and reflected small details which were important to ensure people received their care and support exactly how they preferred. For example, "[Name] likes the memory foam pillow to remain in the centre of the bed to offer back support so please ensure this in place." Staff supported people to remain safe in a non-judgemental and caring way. Another plan was written to respect a person's way of life whilst ensuring their safety. The plan said "The house may feel a little chilly, [Name] is very conscious of finance and rarely puts heating on; Please encourage [Name] to stay warm with extra jumpers and reassure them about the cost of running their home."

- We saw mobile phone technology was used to provide a live service so staff could be communicated with by provided smartphones. One staff member said, "Its a great monitoring toolkit as its live. We can go back to commissioners and say, we need more time for this person or can we use this time elsewhere. I tell other staff this is your bible. It tells them client info such as medicine safe numbers. It has a GPS tracker if we were worried about anyone's safety and we can pass on key messages like someone has started antibiotics."

- Staff were highly knowledgeable about the importance of delivering person-centred care, they told us, "Because I have a consistent run, I have got to know clients and them me. This means I can anticipate if something is different or not right and share this with the team." We saw when one person was admitted to hospital during a call, the staff member noticed their washing machine still had a full load. They took the washing home to dry it and returned it to the person's house the following day so it was ready for their return from hospital.

- The service was exceptional in their responsiveness to people's rapidly changing needs. One relative said, "Without the carers going in, they just wouldn't be able to stay in the old family home on their own anymore and that is really important to them." Another relative told us how the staff team had gone into a very difficult environment, they said, "It was chaos, and they never judged the state of the house. They afforded them every chance to stay at home and brought in other professionals to help."

- The service went above and beyond to encourage people to engage in the community and access local resources such as church services and a food bank. The service shared local information with people about events from bingo to ballroom dancing. The service used it's social media presence locally to share a person

had lost their hearing aid. The search was successful, being found in a nearby garden.

- The service was working within the principles of the Accessible Information Standard (AIS). The AIS is a framework put in place from August 2016 making it a legal requirement for all providers to ensure people with a disability or sensory loss can access and understand information they are given. The service could provide information in different formats for people.

Improving care quality in response to complaints or concerns.

- The service recorded compliments, complaints and informal feedback. Any concerns received were investigated quickly. People were informed of how they could make a complaint at their first meeting and in ongoing reviews of their care. Everyone we spoke with knew how to contact the office and speak with someone if they wished.

End of life care and support.

- The service was not providing any end of life care or support at the time of the inspection. Staff worked with healthcare professionals so people were not in pain and followed end of life care plans to maintain people's dignity.
- One relative got in touch with us after the inspection and told us, "The carers were always polite and patient and respected that my relative had been an intelligent and quietly spoke person even when their dementia made their behaviour challenging. They died at home as they had wished to do and the support they gave my relative and our family in the last hours were extremely good. They visited multiple times daily in the last year and they never let us down. I always knew they would be there."
- The deputy manager and care co-ordinator attended a 'train the trainer' course in end of life care and was keen to champion best practice in this area.

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.

The service was consistently and exceptionally managed and well-led. Leaders and the culture they created promoted outstanding quality, and highly person-centred care.

Planning and promoting person-centred, high-quality care and support; and how the provider understands and acts on duty of candour responsibility.

- The management team demonstrated a commitment to providing excellent person-centred care. During the course of our inspection, the registered manager who was also the owner was away from the service. In their absence, the deputy manager and management team demonstrated their in-depth knowledge of the service, the inspection process and were passionate to tell us about the service provided by SJW Wright Care Limited.
- The senior management team demonstrated that they cared about the wellbeing of their staff. We spoke with one staff member who had a serious accident. They told us, "They have been amazing with me, and supported me and my family, I can't praise this company enough. They have facilitated me to be able to work and feel valued again."
- Staff praised the support they received from the management and said, "It's a fantastic team and I have never worked anywhere as caring."

Working in partnership with others.

- We saw the service approached the local fire brigade to carry out a "Safe and Well" check. The fire service visited people in their own homes with staff from SJW Wright Care present and assessed the risk to people's personal safety. This had led to the fire service installing two special fire alarms for people who were hard of hearing, meaning they could be alerted in case of fire. The service had begun a monthly newsletter for people and staff which included interesting facts and dates for the month as well as important information promoting health and wellbeing with advice on recognising topics as diverse as sepsis to mental health.
- Management attended local forums that kept them up to date with best practice and any areas for improvement. The training lead from the local authority told us the service was an active partner in their network. "They want to find out how they can improve their practice on all topics and support their staff and service users. They have always been keen on attending further sessions to enhance their knowledge further and to take advantage of what is on offer." The service developed new champion roles and personal development mentors to ensure induction training and key areas such as safeguarding and dementia were following best practice in their areas. One person told us, "I am seeing improvement all the time - the carers have courses on a wide variety of situations they encounter including my particular healthcare condition."
- One service commissioner told us, "I have always found the management team to be helpful and knowledgeable." An occupational therapist told us, "Regarding learning and innovation they work collaboratively and are very amenable to joint working." A social worker had also written to the service to praise the "fabulous support" they received from the service whilst someone was admitted to hospital in an emergency situation.

- We saw a letter from Severn Trent Water who took the time to write to the service after an elderly person fell outside their own property. The water board staff contacted an ambulance and the service and carers quickly arrived on the scene. The letter said, "A big thank you from us team of workers to SJW Wright Care for helping us out in a difficult situation."

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

- People's feedback was sought regularly and acted upon. One relative told us, "The incorporation of SJW as the 'core' of my parents' care has proved beneficial to all parties: my parents are cared for professionally, by staff whose company they enjoy, and who are providing varied social stimulation; and the remainder of the family is now more relaxed, confident in the high quality of care that is being provided.."
- The service had developed training delivery following a review of how staff learnt such as visual and group learning. Staff completed pledges to commit to the training they had received. Staff told us they had opportunities to provide feedback about the service. One staff member said, "I suggested an idea for marking files so we would instantly know if a person had a DNACPR (Do not resuscitate record) in a discrete way and now we have a red love heart on those files and a butterfly for people with memory difficulties."
- The provider had a very proactive community engagement plan. The service had run events in aid of local and national charities for older people where all the staff got involved in fundraising. A charity day in the gardens of a local community centre in aid of Motor Neurone Disease had raised £500 for a local person and staff, people and their families had all contributed or attended the event. The person's partner wrote expressing their thanks saying, "We were able to book first class flights as part of my partner's bucket list holiday to the USA. This gave us access to a chauffeur driven car to the airport, a private lounge at the terminal and amazing seats together on the flight. It was one of the best experiences we had and took the stress out of travelling as a disabled person. This would not have been possible without the amazing donation from SJW Wright Care." The service had begun a monthly newsletter for people and staff which included interesting facts and dates for the month as well as important information promoting health and wellbeing.

Continuous learning and improving care.

- There was a highly effective system in place to check on the quality and safety of the service. We saw at a recent management meeting the service had recorded, "After completing the 'Time to Talk Teeth' training it became apparent the importance of oral health in health and social care at present. We must include a more in depth oral care assessment as part of the initial pre-assessment – this will be added to the document." This showed the service was striving to improve and learn from best practice.
- Regular quality checks were completed on all aspects of service provision and processes with both people using the service their families/ representatives and staff to ensure exceptional auditing and oversight of quality assurance, safety and people and staff welfare.

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

- Management were clear about their roles and responsibilities and led the service extremely well.
- Staff performance was monitored during spot checks and discussed at supervisions.
- Managers and staff understood their responsibilities for ensuring risks were quickly identified and mitigated. Risks to people's health, safety and wellbeing were effectively managed through ongoing monitoring of the service.
- All appropriate reporting had been carried out to alert the CQC and local authorities when incidents occurred.