

JEPPS Care Ltd

JEPPs Care Ltd - The Diamond Centre

Inspection report

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Tel: 01623700389

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21 March 2017

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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?

Requires Improvement ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

This announced inspection was carried out on 21 March 2017. JEPPs Care Ltd - The Diamond Centre provides support and personal care to people living in their own homes in north east Nottinghamshire and the city of Nottingham. On the day of the inspection visit there were 11 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. New staff had been recruited to ensure that people were supported by a regular individual or group 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 personal assistants 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 supported by staff who demonstrated compassion and understanding. People were involved in planning their care and were treated with respect by personal assistants who visited them in their homes.

People's plans of care did not contain all the information personal assistants needed to meet their needs. 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 as a team. There were systems to obtain people's views on the service and if any improvements were needed.

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 received their care and support by staff who had been trained to provide this safely.

More staff had been recruited to ensure people were supported by staff to meet their planned needs who they knew.

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?

Requires Improvement ●

The service was not entirely responsive.

People may not receive the care and support they require because their plan of care did not include all the information required to do so.

People were provided with information on how to make a complaint and were given an assurance their care would not be compromised if they did so.

Is the service well-led?

Good ●

People felt the service was well run and had a positive culture. People told us any queries they had were answered promptly by office based staff and any requests they made were responded to positively. One person told us, "I have nothing but high praise for the service they provide, from both the admin and care perspective." A relative said if they contacted office staff with a request for an additional call "they just come out" and also said they were able to make changes to a planned call.

Personal assistants believed the service was well run and valued staff as well as the people who used the service. One personal assistant told us, "From what I see it is run well with the best of intentions. They are good at looking after staff as well." They gave an example that they did not get calls asking them to work on their days off.

The registered manager told us they consulted with staff and welcomed their views and opinions. This was done formally in staff meetings as well as more informally when personal assistants called into the office. The registered manager also told us there were weekly management meetings where they planned and reviewed the service.

Personal assistants said they felt welcomed when they came to the office and any resources they needed, such as personal protective equipment (PPE), were always available, or they would be brought out to them if needed in between office visits. They told us they could always contact one of the managers for advice, including out of hours when there was an 'on call' service provided. Personal assistants said they were given a weekly rota, which the support manager told us was always prepared in good

time so personal assistants knew what they were working the following week. 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. They described the registered manager as "helpful" and one person said they had "made a difference" to the service. Another person told us they had "one hundred per cent praise" for them. Personal assistants said the registered manager was "on the ball" and "approachable".

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. We had not received any recent notifications from the service and the registered manager said there had not been any recent event they needed to notify us of. The support manager, who was also the nominated individual, which is a title we give to the provider's representative, worked alongside the registered manager and supported them in managing the service. One personal assistant told us, "From what I have seen they work lovely together." They added that when they had raised a query one of them always got back to them about this.

The registered manager described the quality assurance process they followed to ensure people were satisfied with the care and support they received. This included visiting people to discuss their care with them and completing forms to comment on 'How is your PA (personal assistant) doing.' There were audit forms on each staff file and the registered manager said they would be introducing a similar system for auditing people's care records.

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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 visit took place on 21 March 2017 and was announced. The provider was given 24 hours' notice because the location was a domiciliary care agency and we wanted to ensure there was someone available to assist us with the inspection. The inspection was carried out by one inspector.

Prior to our inspection we reviewed information we held about the service. This included previous inspection reports, 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 received feedback about the service from four people who used the service and four relatives. We spoke with four personal assistants, the support manager 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 told us they felt safe using the service and they were treated well by the staff who visited them. One person told us they, "Feel safe with them they are always there (either in person or by telephone) when I have a problem." A relative told us their relation "feels very safe with them" and added that they also felt their relation was kept safe.

Personal assistants 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. Personal assistants told us they knew where and how to report any concerns. They told us they would report any concerns they suspected or identified during a visit to either the support manager or registered manager, but they said they had not needed to do so.

Personal assistants were provided with a copy of the provider's safeguarding policy and the contact details for MASH. This is the acronym used for the multi-agency safeguarding hub where any safeguarding concerns are made in Nottinghamshire. Personal assistants told us they had received training on safeguarding and the support manager told us the safeguarding training was one of the first training modules new personal assistants were expected to complete.

People felt the care and support they received from staff helped keep them safe. One person told us personal assistants had to be trained before they could use some equipment they needed to assist with their mobility. A relative of a different person also said that personal assistants had to be trained before they could use any equipment with their relation. Another person told us how personal assistants were always checking their property to make sure there were no hazards for them when they mobilised independently between their care visits.

Personal assistants told us their training included how to maintain people's safety when providing them with any care and support. This included how to assist people with their mobility and protect their skin from pressure damage. One personal assistant explained how they helped people to be able to do as much for themselves as their individual circumstances would allow and that they continually risk assessed people's circumstances. Another personal assistant said they established, "This is the risk and this is what we put in place to make that minimal." We heard some personal assistants discussing a possible increase in risk for one person with the registered manager, who made notes to discuss this with other professionals to see what additional support could be provided. The registered manager told us that part of their initial visit to someone new using the service included undertaking an assessment of their property to ensure the care and support needed could be provided safely. There were copies of these assessments kept in people's care files.

We received mixed comments about personal assistants arriving on time for people's visits. Some of these comments said they were normally on time and they were informed if their personal assistant was running late. Some other comments referred to personal assistants arriving late and that there had been a high

turnover of staff. The registered manager told us there had been a number of staff leave over the last few months and they had been recruiting new staff to replace them. They said that during this time the remaining personal assistants had worked additional hours to ensure all visits were carried out as planned, but this had led to some lateness of appointments. Personal assistants said they had needed to cover some additional calls whilst new staff were recruited, but these requests were getting less as new staff were now "up and running". The registered manager said they now had sufficient personal assistants to complete people's calls as planned. The support manager said there had been the "odd occasion" when they had needed to send a personal assistant to visit someone they had not met previously. They added that this had been an experienced personal assistant and they had notified the person to inform them of this.

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. Personal assistants described having undergone the required recruitment process, and 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. Some people told us they did not need any assistance to manage their medicines, which they continued to do independently or were supported with this by a relative. People who required support were provided with this in the way they wished it to be and they were reminded when it was time to take their medicines. One person told us personal assistants, "Make sure I have taken all my medication, and that I have done it right." Relatives also said their relations were provided with the support they needed to take their medicines.

Personal assistants told us how they supported some people to take their medicines. This included reminding people to take their medicines and placing these in a position where people could take them. A record was then made on a medicine administration record (MAR) to show the person had taken their medicine as planned. One personal assistant told us how they had contacted a relative when a person's medicines were not correct as they sorted any problems that occurred.

Personal assistants told us they had received training on the safe handling and administration of medicines and that their competency in supporting people with these had been assessed. The staff training matrix confirmed personal assistants had received this training and there were completed medicines competency forms on 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. During our conversations with people who used the service and some relatives they told us staff had the training they needed to support them effectively. One person said that personal assistants, "Have to undergo a training scheme before Jepps allow them out in the field." The person added that they were trained to a "very high standard". A relative told us personal assistants "seem to have the training" and said that they sometimes could not support people with certain tasks until they had received training for these. The relative gave an example that a personal assistant had not been able to support their relation to take any medicines until they had done this training.

Personal assistants told us they were provided with the training and support they needed to carry out their work. One personal assistant told us they had been given a "binder of information" which contained details about what was expected of them and how they should carry out their duties. They also attended induction training when they began their employment to prepare them for the work they would need to undertake. This included completing the Care Certificate, which 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.

Personal assistants told us they enjoyed the training as it was good to meet up with other staff and have discussion about their work. They said there was "good teamwork here". Personal assistants said they were now receiving regular supervision from the new registered manager. They said that both the registered manager and support manager were available for support if needed and told us about occasions the support manager had come out to help them. One personal assistant said, "I feel well supported. They are always at the end of the phone for us if we need them,"

Personal assistants told us they were shown how to support each person who used the service they visited before they provided them with any unaccompanied support. Personal assistants said they received the support they needed from the support and registered managers, which included supervision where they discussed their work and any support they needed with this.

The registered manager told us that due to the change of manager in the service and the turnover of staff there were some longer standing personal assistants that were due some training updates. The support manager told us they had prioritised training new staff but they were also now planning the training updates for other staff who had recently been given details of when these will take place. The support manager also told us about further training they were arranging and this was displayed on a noticeboard in the office. The support manager said they were in the process of acquiring the service of a new trainer who would provide these additional training courses and undertake observations of personal assistants as part of the Care Certificate.

People who used the service were asked to consent for their care and support. One person said they only did things they wanted to and that personal assistants knew that. They said, "I don't know whether they check

or I just tell them." A relative told us their relation made a choice that was not thought to be in their best interest, but added that their relation's choice was respected by personal assistants when they visited them.

Personal assistants told us they obtained people's verbal consent before providing people them with any care, and supported them to make decisions about this. They gave examples of people deciding what order they wanted their care and support to be provided in and selecting what they were going to wear that day. A personal assistant said sometimes one person preferred to have something to eat before any care support and at other times they preferred to eat after this. The personal assistant said they always asked the person what order they wanted each visit. Another personal assistant said they would ask people, "What colour do you feel like today?" as a prompt to help them decide. They added, "Just because you are assisting someone to get dressed doesn't mean you choose their clothes."

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. Personal assistants were aware of the principles of the MCA and this was one of the topics included in the further training being arranged by the support manager.

People who required support to ensure they had sufficient to eat and drink to maintain their health and wellbeing were provided with this. They told us they were provided with meals and snacks during their visits. One person told us personal assistants, "Cook a nice meal within the time parameters available."

Personal assistants told us they prepared meals for some people they supported and encouraged them to eat these. They also spoke of providing people with drinks during their visits and leaving further drinks within people's reach when they were leaving. Personal assistants told us most of the people they supported did not require a lot of nutritional support but they did use charts to record people's food and fluid intake if this needed to be monitored. They also told us there was not anyone who required a specific diet for health, cultural or religious reasons. The registered manager said they had not needed to liaise with any healthcare professionals about people's nutritional support, but they would do so if this was needed.

People were supported by staff who understood their healthcare needs and knew how to support them with these. One person told us how personal assistants had persistently and patiently provided them with some treatment they needed which had over time improved their health and wellbeing. The person told us, "I am immensely grateful for them doing it."

Personal assistants told us they always asked people how they were feeling and said they could normally tell if someone was not feeling well. They told us they recognised signs and symptoms that indicated they may need to call a health care professional, such as a district nurse or GP and, if needed, they would contact the emergency services. One personal assistant said they always tried to arrange for a doctor to visit when they or another personal assistant were present for one person, as they needed this additional support to explain their problem. The registered manager told us they supported people to attend any medical appointments when they requested this. They told us how one person was "reassured a lot" by having this support. The support manager said they were planning some specific training around people's health care needs and that all personal assistants had received training in first aid.

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, "I've had one bad experience but the rest are fine. It's just the way they approach their work." The person went on to say, "They believe me and take me at my word when I say I can't do something. They help me as much as I need. They certainly do care." Another person said staff who worked for the agency "bothered about the care" they provided. A relative told us, "I couldn't wish for better people to look after my [relation]."

One person told us that being supported by the service promoted their independence as they knew they had someone to call on if needed. They described how they had contacted the office staff when they had an accident when out in the local community. The person said the provider had come out to collect them and take them home, and they told us how everyone had been "most worried about me". The person also said, "They have come to my rescue on more than one occasion."

Personal assistants described doing this type of work because "they care" and being "able to make a difference" to someone. They gave examples of cooking someone a meal they enjoyed and "just sitting and having a chat". One personal assistant told us they took one person to a regular activity and said, "This is personalised to them and they get a lot out of it, and in turn I get a lot out of it." Another personal assistant said, "You have to want to do this type of work, it can be demanding and a real challenge." The registered manager said they were confident they had a "caring team of staff".

People were involved in planning their care and support and making decisions about this. People said they had been involved in preparing their care plans. One person said they had prepared their care plan with the support manager, and that, "If there is something I'm not sure about they will always explain it to me." A relative told us that their relation required personal assistants to follow a regular routine and said that their relation had "definitely" been involved in forming this "when it was written down" at the start of their service.

Personal assistants said people chose and decided the care and support they wanted and how this was provided to them. One personal assistant said, "It is all based around what the client wants and what they enjoy doing." The support manager said people were asked what they wanted from the service when they started to use it. They told us they explained to people it could take three to four weeks to "settle the (care) package" to make sure this was right for the person and what they needed.

The register manager told us they had sought advice from an advocate for one person and provided details to others on how to contact this service. Advocates are trained professionals who support, enable and empower people to speak up about issues that affect them.

People who used the service said they felt they were treated with respect and that staff were polite and respectful. One person said they found personal assistants were "empathetic" and, "Do not show any reluctance in any of the things they have to do for me." A relative told us how personal assistants provided

their relation with the support they needed but did not "take their independence away". One person said they did not want personal assistants to be respectful as they preferred to have a good laugh about the support they needed. They told us, "I need us to be able to have a laugh together about it, unless they find it funny it would be depressing for me."

Personal assistants described how they conducted themselves in a respectful way when in people's homes and respected their thoughts and beliefs. They spoke of giving people choices so they made any decisions and described how they provided any personal care in a way that promoted people's privacy and respected their modesty.

Is the service responsive?

Our findings

We found people's care plans did not describe the support they required in sufficient detail to provide personal assistants with guidance on how tasks should be undertaken. For example there was a reference to one person needing to be repositioned to protect their skin condition, however there was no detail provided about when and how this should be done. There was a lack of assessments to show the safest way to provide people with their care as well as insufficient detail about how to fit pieces of equipment that people used. In addition the daily logs did not show that some essential care and support had been provided during a visit so we could not be assured this care was provided.

The registered manager told us they knew people were receiving the care and support they needed but agreed their records did not show this. They told us they were in the process of rewriting each person's care plans as they had recognised this needed doing when they took up their role. They were also introducing a new system for recording what took place during a visit, which would include a system for auditing the records made to ensure they had all the information needed.

Although we found the care plans lacked detail and some assessments had not been completed there was a process in place to assess people's needs and prepare a plan of care to provide staff with guidance on how these should be met. One person told us there were regular checks carried out to ensure they were receiving the care and support they wanted. Relatives and people who used the service said the care plans were kept under review and updated when needed. One person said they were "in the throws of having a new one done" which they were involved in. One person told us they were given a copy of their care plan in large print to help them read this.

The registered manager and support manager both undertook some visits to people. These included accompanying new personal assistants when meeting people who used the service and covering some shifts due to absences from work. The support manager said they felt it was important for them to be involved in some of people's visits as this gave them the insight into ensuring they were providing people with person centred care.

People told us they were pleased with the care and support they received and this met their needs. One person described the care and support they received as "very good" and said everything "worked out well". Another person told us, "I am more than happy with the service I get." A relative told us, "We can't fault them, they are providing for [name]'s needs." A personal assistant told us they believed people's needs were met and that this service "seems to be a lot more client oriented" than previous services they had worked for. They added that, "Everything we do is to meet their needs."

The registered manager told us each person had a review after the first seven days of using the service, and then another one after the first four weeks. They said after that each person's care was reviewed every six months, or sooner if needed. Personal assistants told us that they felt they met people's needs and comments people made to them during visits confirmed this to them.

The length of people's calls was based on the support they had been assessed to need. For some people this included some time for social activity and inclusion as well as their care and support needs. One person told us personal assistants took them on shopping trips and assisted them to purchase their weekly food supplies. Another person's relative told us how personal assistants were helping their relation to learn to cook with weekly cooking sessions. This involved planning a meal, purchasing the ingredients needed to make this and then cooking it. The relative also said their relation was supported by personal assistants to follow their interests who took them to a riding lesson each week. We saw a staff member leaving the office to take this person to another regular activity that they were supported to attend.

People were provided with information on what to do if they had any concerns or complaints with the service. A relative said they had been told how to make a complaint but they had not needed to do so. People told us they felt able to raise any concerns and were confident these would be acted upon. One person told us, "I just ring up and tell them if something is not right. If anything isn't right they know about it." A personal assistant told us that, "Everyone I have met is aware of the information." They also said, "Clients are comfortable to phone the office if they have any concerns."

The support manager showed us a form people could use to record any complaint they wished to make. This explained to people how their complaint would be managed and contained an assurance they would 'not receive any reduction in service' because they had made a complaint. The support manager showed us the record of formal complaints kept, which showed there had not been any made since our last inspection.

Is the service well-led?

Our findings

People felt the service was well run and had a positive culture. People told us any queries they had were answered promptly by office based staff and any requests they made were responded to positively. One person told us, "I have nothing but high praise for the service they provide, from both the admin and care perspective." A relative said if they contacted office staff with a request for an additional call "they just come out" and also said they were able to make changes to a planned call.

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satisfied with the care and support they received. This included visiting people to discuss their care with them and completing forms to comment on 'How is your PA (personal assistant) doing.)' There were audit forms on each staff file and the registered manager said they would be introducing a similar system for auditing people's care records.