

J.C.Michael Groups Ltd

J.C.Michael Groups Ltd

Docklands

Inspection report

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Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

About the service

J.C.Michael Groups Ltd Docklands is a domiciliary care agency. It provides personal care to people living in their own homes. It provides a service to younger disabled adults and older people, some living with dementia. It also supports people with more complex care needs who require regular monitoring and overnight support.

Not everyone who used the service received personal care. CQC only inspects where people receive personal care. This is help with tasks related to personal hygiene and eating. Where they do we also consider any wider social care provided.

At the time of the inspection the provider was supporting 107 people across seven London Boroughs with personal care.

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

People and their relatives were positive about the support they received from their regular care staff who helped to keep them safe. One person said, "I feel very secure and safe with them. They make a big difference to me."

Risks to people were assessed and staff had a good understanding of the support people needed. Where people received more complex care and support, healthcare professionals were confident people's needs could be met and had a positive working relationship with the provider.

People were safeguarded from the risk of abuse and avoidable harm. The provider had systems in place and carried out the appropriate investigations when issues or concerns were raised. This included liaising closely with professionals for further advice and guidance.

People's care was monitored to ensure it was delivered within a specific timeframe and no visits were missed. Where timekeeping issues were highlighted, the management team took action to address the concerns.

People were supported by staff who were positive about working for the company and felt appreciated. Staff were confident their issues would be listened to and felt well supported.

The majority of feedback from people and their relatives about the management of the service was positive and the registered manager worked closely with people and a range of health and social care professionals to ensure people received good care.

There were monitoring and auditing systems in place to identify any issues with the quality of the service. Where issues were raised, the management team worked with people, their families and the relevant health

and social care professionals to resolve them.

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

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

Rating at last inspection and update

The last rating for this service was requires improvement (published 10 November 2020) and there was a breach of regulation. The provider completed an action plan after the last inspection to show what they would do and by when to improve. At this inspection we found improvements had been made and the provider was no longer in breach of regulations.

Why we inspected

We carried out an announced focused inspection of this service on 11 September 2020. A breach of legal requirements was found. The provider completed an action plan after the last inspection to show what they would do and by when to improve notifiable incidents.

We undertook this focused inspection to check they had followed their action plan and to confirm they now met legal requirements. This report only covers our findings in relation to the Key Questions Safe and Well-led which contain those requirements.

For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating. The overall rating for the service has changed from requires improvement to good. This is based on the findings at this inspection.

When we inspected the service we found the provider had moved to a new address, and was in the process of re-registering the location. We worked with the provider and the CQC registration team to rectify the situation which led to the delay in the report being published. Since the change in registration, this service was registered as a new location on 17 April 2023.

You can read the report from our last comprehensive inspection, and previous inspections, by selecting the 'all reports' link for J.C.Michael Groups Ltd Docklands on our website at www.cqc.org.uk.

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?

Good ●

The service was safe.

Details are in our safe findings below.

Is the service well-led?

Good ●

The service was well-led.

Details are in our well-led findings below.

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Detailed findings

Background to this inspection

The inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 (the Act) as part of our regulatory functions. We checked whether the provider was meeting the legal requirements and regulations associated with the Act. We looked at the overall quality of the service and provided a rating for the service under the Health and Social Care Act 2008.

Inspection team

This inspection was carried out by one inspector and two Experts by Experience. An Expert by Experience is a person who has personal experience of using or caring for someone who uses this type of service.

Service and service type

J.C.Michael Groups Ltd Docklands is a domiciliary care agency. It provides personal care to people living in their own homes.

Registered Manager

This provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations.

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

Notice of inspection

We gave the provider a few days notice because we needed to ensure they would be available to assist us with the inspection.

Inspection activity started on 3 December and ended on 22 December 2022. We requested a range of documents that were sent to us by the provider between 3 December and 22 December 2022. We visited the office location on 7 and 9 December 2022 to see the registered manager and to review further records related to the service. We made calls to people, their relatives and care staff between 6 and 16 December 2022.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. This included any significant incidents that occurred at the service. We used the information the provider sent us in the provider information return (PIR) dated 8 October 2021. 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 contacted local authority commissioning teams and also reviewed the previous inspection report and action plan. We used all of this information to plan our inspection.

During the inspection

We reviewed a range of records related to 16 people's care and support. This included people's care plans, risk assessments, medicines records and 7 staff files in relation to recruitment and training. We reviewed records related to the management of the service, which included safeguarding incidents, quality assurance records, minutes of staff meetings and a range of policies and procedures.

We also reviewed electronic call monitoring (ECM) data for 93 people for the month of October 2022. An ECM system is where care workers log in and out of their calls, and the information is recorded.

We spoke with 8 staff members. This included the registered manager, a care coordinator and 6 care workers.

We contacted a number of care workers, via email and telephone. We also asked the registered manager to share a questionnaire with all active care workers to give them an opportunity to give us feedback about their experience of working for the service. We received feedback from a further 27 care workers.

We contacted 35 people and managed to speak with 13 people and 14 relatives. We also spoke with 4 health and social care professionals who had experience of working with the service.

We continued to seek clarification from the provider to validate evidence found after the inspection. We looked at further quality assurance records and ECM data, training records, medicines audits and correspondence with a range of professionals related to people's care.

We provided formal feedback to the registered manager via email on 20 December 2022.

Is the service safe?

Our findings

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

At the last inspection this key question was rated as requires improvement. At this inspection the rating has changed to good. This meant people were safe and protected from avoidable harm.

Using medicines safely

- There were procedures in place to ensure people received their medicines safely and we continued to see improvements being made since the last inspection. People's care records contained information about their medicines, including a list of medicines, when they needed to be taken and the level of support required.
- Staff completed medicines training and had their competency assessed before they started supporting people with their medicines. Staff who supported people with their medicines were positive about the training and support they received, which included support from healthcare professionals when more complex support was needed.
- The provider carried out checks to ensure people received their medicines on time and identified any issues. We saw if concerns or errors had been identified, this had been followed up with people's GP's and the pharmacy.
- Staff also received regular reminders and medicines support was discussed in team meetings. Where improvements were needed, staff completed refresher training and shared learning to ensure they understood their responsibilities.
- Where we identified one minor discrepancy related to a person's medicines information, the registered manager acknowledged the record needed to be updated. However, we saw the care worker had informed the office and was supporting the person with the correct medicines.

Staffing and recruitment

- Despite the current challenges within the health and social care sector, the provider continued to recruit new staff, including staff from overseas via a sponsorship programme to ensure they had enough staff to meet people's needs.
- The provider used an Electronic Call Monitoring (ECM) system and we reviewed and analysed 8943 calls for 93 people over the period of October 2022. Our analysis did not identify any major concerns with scheduling, and staff logged in and out of a high percentage of calls.
- We received mixed feedback about timekeeping and punctuality. People with positive feedback told us they had no issues and were informed if staff were running late. Comments included, "I feel they are in safe hands as they always turn up on time" and "They are mainly on time, if they are late, it is only a few minutes and doesn't happen often."
- Feedback highlighting timekeeping issues included, "The first week was terrible as we weren't informed" and "Lateness has caused issues as we have a nurse involved and they cannot wait around to alter their time."
- We discussed this with the registered manager and we saw staff were regularly reminded about their

requirement to log in for calls and report to the office if they were running late. Staff punctuality was monitored and the provider followed disciplinary procedures if staff did not follow policies and procedures.

- Staff told us their schedules were manageable and they worked in the same area, having time to travel between calls. We saw some recent examples of late visits had been the result of traffic and increased disruption in the area due to rail strikes.
- The provider continued to follow safer recruitment procedures to ensure staff were suitable to work with people who used the service. Disclosure and Barring Service (DBS) checks for staff were in place along with appropriate references and proof of identity. DBS checks provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.

Assessing risk, safety monitoring and management

- Risks to people's health continued to be assessed before the service started or if there were any changes in their support needs. Risk assessments were completed with guidance in place for staff to follow to support people safely. Where required, the provider had supporting assessments and guidance from a range of health and social care professionals who were closely involved in people's care.
- Where areas of risk included more complex health conditions, such as support with tracheostomy care, bowel management and percutaneous endoscopic gastrostomy (PEG) feeds, staff completed specialist training with the clinical lead, who signed staff off as competent before they worked with people. A PEG feed is an endoscopic medical procedure in which a tube is passed into a person's stomach through the abdominal wall, most commonly to provide a means of feeding when oral intake is not adequate.
- Staff had a good understanding of the support people needed and were positive about the level of training and support they received, especially with more complex care. Health and social care professionals told us they were confident staff understood how to manage complex care needs.
- The majority of feedback from people and their relatives was positive about the support and felt staff knew how to keep them safe. One relative said, "[Family member] has 24-hour care and needs two staff to move them. They feel safe when they are transferring them and the staff know what they are doing. We are very lucky."
- Where one relative told us they felt staff lacked the skills and experience to provide the required care, we followed this up with the registered manager. They confirmed staff had completed the necessary training and had tried to arrange a joint meeting to discuss their concerns.

Preventing and controlling infection

- There was an infection and prevention control (IPC) policy in place and staff had completed IPC training to ensure they had a good understanding of keeping people safe from infections and reduce the risk of COVID-19.
- Staff told us they had been kept regularly updated with advice and guidance throughout the pandemic. They had enough personal protective equipment (PPE) and had been well supported during challenging periods. One care worker said, "We have had to be very careful and always ensure we protect our clients. We are regularly reminded about IPC and this has been drummed into us, using PPE and disposing of it safely."
- People and their relatives confirmed staff washed their hands, wore PPE and did not raise any concerns. Only one staff member felt improvements were needed with how PPE was managed and distributed across the organisation.

Systems and processes to safeguard people from the risk of abuse

- There continued to be systems and policies in place to ensure people were protected from the risk of abuse. Where concerns were raised, safeguarding protocols were followed with investigations carried out and shared with the relevant health and social care professionals.

- Staff completed safeguarding training and had regular opportunities to discuss safeguarding issues. Staff we spoke with were confident the registered manager would take the appropriate action if safeguarding concerns were raised.
- There was further oversight from the management team as a safeguarding log was in place and formed part of the provider's monthly checks to ensure all necessary actions had been completed.

Learning lessons when things go wrong

- There were systems in place for the reporting of any accidents and incidents and the provider discussed this with staff to ensure they were aware of the procedures to follow.
- Staff confirmed they had opportunities to learn from any incidents and this was highlighted in investigation reports and correspondence with the relevant health and social care professionals. For example, we saw how an incident where a staff member was alleged to have fallen asleep during a waking night shift had been discussed across the staff team.
- We also saw office staff had been spoken with and procedures updated when care staff had highlighted issues with care visits being added to their rota without prior confirmation. This ensured the risk of repeat incidents were reduced.

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.

At the last inspection this key question was rated as requires improvement. At this inspection the rating has changed to good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care

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

At our last inspection the provider had failed to notify the Commission about incidents that had occurred at the service. This was a breach of regulation 18 of the Care Quality Commission (Registration) Regulations 2009.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 18.

- The provider had made significant improvements since the last inspection and the registered manager was aware of their responsibilities regarding notifiable incidents. They had a good understanding of when notifications had to be submitted and all incidents had been submitted in a timely manner.
- The registered manager also had regular contact with the CQC regarding any notifiable incidents and was proactive in asking for advice if needed.
- Safeguarding incidents and CQC notifications were also recorded in a central electronic log and formed part of the management audit cycle to check all appropriate incidents had been notified without delay.
- Staff told us they were regularly reminded about their key responsibilities to ensure people received the correct level of care, via memos and team meetings. One staff member said, "They are fantastic with updates and reminders. We get a lot of support, advice and can share any issues."

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

- The majority of feedback was positive about the management of the service and level of care provided. Comments included, "They are absolutely marvellous and have made a huge difference to us. I would recommend them" and "I feel we have a good rapport with the management and they are always available, day or night. I am happy and confident with what they are doing and they understand our needs."
- Where we received feedback of a negative nature, which related to communication issues, we discussed this with the registered manager. We saw they had followed this up with people and their relatives, including the relevant healthcare professionals to try and resolve any issues.
- Staff were very positive about the support they received and highlighted the positive working environment across the service. Comments included, "The manager is very hands on, hardworking and gives great support to us and our clients. He is very dedicated in making sure people get the best care they can" and

"They are there for us, listen to us and give us the support we need. I appreciate them being there for me when I need it."

- Feedback from health and social care professionals was also positive. One said, "[Registered manager] has a good understanding of people and families. He has helped manage some very challenging and complex packages where other agencies were unable to, which amazed us."

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

- People and their relatives had opportunities to be involved in the service and give feedback about their care. Along with reviews, the provider had regular contact with people to understand their experience. One person said, "The manager comes to the house to discuss my care plan. If I need to contact them I can ring direct as someone always answers. I also complete a questionnaire quarterly. I would recommend the company as I am happy with the care."

- Staff spoke positively about how they felt listened to and were involved in the service. Comments included, "They care about me and my wellbeing, checking if I am OK, reminding me to stay warm in the cold weather. They care for us as much as the clients" and "They have empathy and understanding for us and the clients, which I admire. I feel appreciated and valued working here."

- One staff member told us one of the positive elements of the service was the support and training that was available, which helped to develop their skills and encouraged them to reach their full potential.

Continuous learning and improving care

- There were systems in place to monitor the service and we saw improvements continued to be made since the last inspection to see if people were receiving the care they needed and identify areas to improve upon.

- Along with regular communication with staff, there was a range of quality assurance audits in place which picked up any issues with the service. This included people's MARs and daily logs, which was discussed with staff to ensure they followed correct procedures. Timekeeping was also reviewed and discussed with staff, with reminders for staff to contact the office if they were running late.

- Spot checks and telephone monitoring calls were also in place to get feedback from people, their relatives and staff about the care provided, including observations of staff competencies. One staff member said, "They check that I have been coming and doing what I need to do. I then get feedback about the visit, and how I am doing."

- Another staff member told us there were regular checks, especially at the start of a new service, to provide feedback about how it had been going. They added, "After a spot check, we discuss the client, if there are any issues or areas of improvement. We can also raise any health and safety issues we might have, which is very helpful."

- Health and social care professionals were confident the provider was able to manage people's care needs and address any issues. One said, "You can tend to get more issues with care needs that are complex. They follow up with visits, listen to recommendations and change staff if needed to resolve any problems."

Working in partnership with others

- The provider worked closely with a range of health and social care professionals to discuss people's health and wellbeing and ensure their needs were met. We continued to see many examples where the registered manager had regular correspondence with social workers and clinical leads, including accessing further training and guidance for people with complex care needs.

- Health and social care professionals were positive about the relationships they had built with the registered manager and were confident in the care and support that was provided. Comments included, "They are easy to approach, quick to respond and very communicative" and "He responds well, works

closely with the hospital around discharges and will follow up if there are any changes after the assessment."

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 responsibility to be open and honest with people if something went wrong. Investigations highlighted if there had been shortfalls or where areas of improvement were needed. Management meetings also highlighted the need for honesty and transparency to be a main area for the organisation to focus on.
- A health and social care professional told us the registered manager had been open and transparent and worked closely with them, listened to people and their relatives if they had raised any issues.