

Luton Borough Council

Colwell Court (Domicillary Care)

Inspection report

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Ratings

Overall rating for this service	Good ●
Is the service safe?	Good ●
Is the service effective?	Good ●
Is the service caring?	Good ●
Is the service responsive?	Good ●
Is the service well-led?	Good ●

Summary of findings

Overall summary

This announced inspection took place on 8 September 2017. At the last inspection in May 2015 the service was rated 'Good'. At this inspection we found the service remained 'Good' in all key areas.

The service provides domiciliary care and support to people in their own homes, within an extra care housing scheme. Some of the people supported by the service may be living with dementia, chronic health conditions and physical disabilities. At the time of the inspection, 11 people were being supported by the service.

There was a registered manager in post. 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.

Potential risks to people's health, safety and welfare had been reduced because there were effective risk assessments in place that gave guidance to staff on how to support people safely. There were systems in place to safeguard people from abuse or avoidable harm and staff had been trained in safeguarding procedures. The provider had effective recruitment processes in place and there was sufficient numbers of staff to support people safely. People's medicines were managed safely.

Staff had regular supervision and they had been trained to meet people's individual needs. They understood their roles and responsibilities to seek people's consent prior to care and support being provided. The requirements of the Mental Capacity Act 2005 (MCA) had been met.

People were supported by caring, friendly and respectful staff. They were supported to make choices about how they lived their lives. Where required, people had been supported to have enough to eat and drink to maintain their health and wellbeing. They were also supported to access other health services.

People's needs had been assessed and they had care plans that took account of their individual needs, preferences, and choices. People and their relatives had been involved in planning and reviewing people's care plans. Where required, staff supported people to attend a day centre based in the building in order for them to pursue their hobbies and interests or socialise with others.

The provider had an effective system to handle complaints and concerns. They encouraged feedback from people who used the service, their relatives, other professionals and staff, and they acted on the comments received to continually improve the quality of the service.

The service was being well managed and the provider's quality monitoring processes had been used effectively to drive continuous improvements. The manager provided stable leadership and effective support to the staff. They worked well with staff to promote a caring and inclusive culture within the service.

Collaborative working with people's relatives and other professionals resulted in positive care outcomes for people who used 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 remains Good.

Is the service effective?

Good ●

The service remains Good.

Is the service caring?

Good ●

The service remains Good.

Is the service responsive?

Good ●

The service remains Good.

Is the service well-led?

Good ●

The service remains Good.

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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 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.

This comprehensive inspection took place on 8 September 2017 and was announced. We gave 48 hours' notice of the inspection because we needed to be sure that there would be someone in the office to support the inspection process. The inspection was carried out by two inspectors.

Before the inspection, we reviewed information we held about the service, including the previous inspection report and notifications they had sent us. A notification is information about important events which the provider is required to send to us.

During the inspection, we spoke with six people who used the service, a friend of one person, four care staff, the team leader, and the registered manager.

We looked at the care records for six people and four staff files to review the provider's staff recruitment and supervision processes. We also reviewed the training information for all staff employed by the service. We checked how medicines and complaints were being managed. We looked at information on how the quality of the service was being monitored and managed. We received positive verbal feedback from a professional working for the local authority that commissioned the service.

Is the service safe?

Our findings

At this inspection, we found the provider continued to protect people from potential abuse, harm and risks, and the rating for this key area remains 'Good'.

People told us that they were safe and supported well by staff. They were also observed to be comfortable in the presence of staff. One person said, "I feel safe, yes I do." Another person told us, "I do feel safe here." A third person said, "A good thing here is that I do feel safe."

We noted that staff knew how to keep people safe and they had received training to enable them to identify when people may be at risk of harm or abuse and what actions they could take to protect them. There was information about safeguarding procedures on noticeboards in the office and throughout the building and staff were aware of these, as well as the provider's whistleblowing policies they could follow to report concerns. A member of staff who told us that they had once reported a concern said they were confident that the manager would deal with concerns appropriately.

Potential risks to people's health and wellbeing had been assessed and each person had personalised risk assessments which identified the risks they could be exposed to and the support needed to minimise the risks. We saw that the risk assessments had been reviewed regularly or updated when people's needs changed. Staff had also completed an assessment of people's homes to ensure that they were free from hazards that could put them, their visitors and staff who supported them at risk of harm. The manager told us that they also worked closely with the 'site manager' to ensure that any environmental health and safety issues that could impact on people's lives were dealt with in a timely way. There was evidence that prompt action was taken to rectify any potential hazards.

The provider had safe staff recruitment procedures in place to ensure that only suitable staff were employed by the service. We noted that staff retention was very good and people told us that there was sufficient numbers of staff to support them safely and at their agreed times. One person told us, "The staff are good at being on time." Two care staff vacancies were being covered through a mixture of agency staff and permanent staff working additional shifts. One member of staff told us, "The service is reasonably staffed and gaps are plugged." An agency member of staff who worked at the service regularly told us, "I am fairly regular here and it's a good place to work." We found this promoted consistency of care.

People were happy with how their medicines were managed, including one person who said, "Staff bring my medication every day." Another person said, "Staff help me with medication. It's always on time." People's medicines were managed safely because there were systems in place for ordering, recording, storing, auditing, and returning unrequired medicines to the pharmacy. The medicine administration records (MAR) we looked at showed that people had been given their medicines as prescribed by their doctors. We saw that medicines were administered by staff who had been trained and assessed as competent to do so safely.

Is the service effective?

Our findings

At this inspection, we found staff continued to have appropriate skills, knowledge, experience and support necessary for them to provide effective care to people who used the service. Staff also worked within the guidelines of the Mental Capacity Act 2005. This meant that the rating for this key area remains 'Good'.

People told us that they were happy with how staff supported them and that staff had the right skills to provide effective care. One person told us, "I think they are well trained." A friend of another person said, "The carers are great."

Staff were complimentary about the training and support they received through regular supervision and appraisals. They were confident in their ability to support people effectively and they knew who to ask for additional support when required to meet people's individual needs. One member of staff said, "I had a good induction when I came. The management team is very supportive." Another member of staff told us, "People get very good care. I am supervised by [Team Leader] three monthly." They further told us about training they had completed which included health and safety awareness; safeguarding; dementia awareness; first aid; and medicines management.

Most people were able to give verbal consent to their care and support, and they were happy with how staff supported them. Staff told us they always asked for people's consent before care was provided and also ensured that people had a say in what support they needed each visit. The requirements of the Mental Capacity Act 2005 (MCA) were met. Staff had been trained on the MCA and they showed good knowledge of what was expected of them to ensure that people's rights were protected. The 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.

Where required, people were supported by staff with their meals. Some of the people we spoke with were being supported with their meals and none of them was concerned about how this had been done. Staff were also not concerned about people not eating or drinking enough to maintain their health and wellbeing.

People's health needs were met because the service continued to work closely with various health professionals. Although staff did not routinely support people with their health appointments, they assisted them to access urgent care if they became unwell. One person told us, "The doctor came up recently about my ear. It was arranged for me." Another person said, "The doctor comes here when I need one." A third person said, "Staff help arrange health care appointments, but my family would help get me there."

Is the service caring?

Our findings

At this inspection, we found the staff continued to support people in a caring and compassionate manner. This meant that the rating for this key area remains 'Good'.

People we spoke with told us that staff were kind and caring towards them. One person told us, "I do like it here, there are some wonderful staff." Another person said, "The staff are very nice." A third person said, "Staff are caring. They keep checking on me." A friend of another person said, "All the carers are lovely and conscientious."

We noted that staff spoke fondly about people they supported, and they appeared to have positive and inclusive relationships with people. We observed friendly and respectful interactions between staff and people who used the service. Staff chatted freely with people when they visited their homes to support them and people confirmed that they got on well with most of the staff. One person told us, "I get on well with some staff than others, but it's a friendly place." Another person told us, "I am happy and I am alright. Thank you very much."

Staff knew people well and they supported them to make decisions and choices about how they lived their lives. People told us that they made decisions about their care and staff respected this. One person said, "It's pretty good. I can do what I want when I want." When asked about how they supported a person to make choices, one member of staff said, "We give [Person] choice about her clothes and personal care. We ask if [Person] would like a bath, shower or chair wash." They also added, "I do a shopping list for [Person]'s son. I ask [Person] about what she wants." The manager told us that people had a choice of staff they preferred to support them, but stressed that this was not an issue at present as people were happy with all care staff. People were appreciative of the support that enabled them to remain as independent as possible and living in their own homes. Staff told us that they saw their role as that of enabling people to maintain their daily living skills so that they continued to do as much as possible for themselves. One member of staff said, "Our role is to ensure that people continue to do as much as possible for themselves. It is satisfying when I see how much progress people make, particularly those who need rehabilitation after surgery or a period in hospital."

People told us that staff supported them in a respectful manner, and they promoted their privacy and dignity. One person said, "The staff do treat me with respect." Another person said, "Staff are very respectful." A third person said, "Staff respect me and treat me how I like to be treated." People knew how to access additional support as they had been given information about the service including the times they would be supported, contact details of the service and the complaints procedure. People named the team leader as the member of staff they would speak to if they needed anything in relation to their care sorted.

Is the service responsive?

Our findings

At this inspection, we found the rating for this key area remains 'Good' because people were still being supported to receive personalised care that was responsive to their individual needs. There was also evidence of learning from people's concerns and complaints in order to make continuous improvements to the quality of care.

People's individual needs were being met by the service because staff continually reviewed the level of support people required. Each person had personalised care plans that took into account their needs, choices, views and preferences. We saw that staff worked closely with people, people's relatives or friends and other professionals to ensure that the care provided to people was appropriate and continued to meet their needs. A person's friend told us that staff regularly contacted them if they needed to discuss aspects of the person's care they were involved in. They added, "[Team leader] is wonderful. She always lets me know if anything is needed and communicates well." Records of regular consultations with people showed that they were happy with how staff supported them. People told us that they were responsive to their needs and always supported them quickly when they called for assistance. One person said, "If anything happens, staff are here fast. A couple of weeks ago I needed help to get to the toilet and when I used my call bell, they came." Another person told us, "Staff come quickly when I use my alarm. I use it now and then when I need help." A third person said, "I don't use my alarm much, but staff come quickly when I do."

Although the service did not support people to pursue their hobbies and interests, staff told us that they always provided people's care in a timely way so that they could get on with their chosen activities. We saw that some people attended a day centre which was operated in the same building by another team and others went out regularly with their relatives, friends or paid personal assistants. When supporting people, staff also provided companionship so that people did not feel socially isolated and lonely. We observed how staff chatted pleasantly to a person we were speaking with when they arrived to help prepare the person's lunch.

The provider had a complaints policy and procedure, and people knew how to raise concerns or complaints they might have about the service. People we spoke with told us that they had never complained about anything as staff were responsive when they asked for something to be changed. One person said, "I am happy and I have no complaints." Another person said, "I would talk to [Team leader] if I needed to make a complaint." A third person said, "If I needed to make a complaint I would go to [Site Manager], but I haven't had to." There had been two recorded complaints in the last 12 months, and we saw that the manager had taken appropriate action to investigate these and respond to the complainants in a timely way.

Is the service well-led?

Our findings

At this inspection, we found the service was still well-led and provided good quality care to people who used the service. People remained at the centre of everything that staff did. This meant that the rating for this key area remains 'Good'.

The service had a registered manager who managed all three of the provider's extra care services. They were therefore not always based at the service and a team leader was responsible for the day to day management of people's care and providing leadership to the staff. It was for this reason that some people thought the team leader or site manager was the manager, but they were all complimentary about how well the service was managed. People had no concerns about the quality of the service and this was reflected in the written compliments the service received, as well as the positive feedback people provided during their monthly keyworker engagement meetings, six-monthly service user consultations and annual surveys. A new questionnaire had been recently developed so that people's feedback enabled the provider to assess their performance against the Care Quality Commission's key questions. These enabled the service to assess whether it was safe; effective; caring; responsive and well-led in order to provide good quality care to people. The provider achieved positive care outcomes for people they supported because they worked collaboratively with people, people's relatives or friends, and other professionals.

Staff were happy with the quality of the service and how it was managed. They also said that people's individual needs were being met because everyone who worked at the service was good and dedicated to their roles. One member of staff said, "It's a good place to work and there is good team working." Another member of staff said, "I love my job and I do my best for people." Staff told us that they felt valued and enabled to contribute to the development of the service by attending monthly team meetings. Minutes of these meetings showed that various issues relevant to staff's roles were discussed. In addition to the provider's annual staff survey, the manager had also introduced a local survey and the recent results in August 2017 showed that the majority of staff provided positive feedback. The manager had completed an action plan to address areas where negative feedback had been provided. The action plan included what systems were already in place to drive further improvements and what additional systems needed to be developed.

The provider had effective systems in place to assess and monitor the quality of the service. The manager and the team leader completed regular audits and took appropriate action to rectify any shortfalls in a timely way. The manager discussed with us their development plans and we saw that they had included areas they planned to work on in the next few months in their 'Governance improvement plan', which was then incorporated into the wider service plan for 2017-2018. The manager told us that these plans to further enhance the quality of the service were achievable because the provider was supportive and always put necessary resources in place to achieve their aims. This showed that the provider aimed to continually improve the quality of the service.