

Neighbourhood Care Limited

Home Instead Senior Care - Watford

Inspection report

Park House
15-23 Greenhill Crescent
Watford
Hertfordshire
WD18 8PH

Date of inspection visit:
30 March 2016
07 April 2016

Date of publication:
12 May 2016

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

The inspection took place on 30 March and 7 April 2016 and was announced to make sure that the people we needed to speak with were available to assist us with the inspection. At our last inspection on 22 February 2014, the service was found to be meeting the required standards in the areas we looked at. Home Instead senior care Watford is registered to provide personal care and support to people who lived independently in their own homes.

There was a manager in post who had applied to become registered with the Care Quality Commission (CQC). A registered manager is a person who has registered with the CQC 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 and associated Regulations about how the service is run.

People felt safe, and were happy with the way they were supported in their homes. Staff had received training in how to safeguard people from the risk of abuse and knew how to report concerns both within the organisation and externally if necessary. Recruitment practices were safe and effective to help ensure that all staff were suitable to work with people in their own homes.

Relatives and people who were being supported by the service were positive about the skills, experience and abilities of staff who worked in people's homes. Staff received training and refresher updates relevant to their roles and had regular supervision meetings to discuss and review their development and performance.

People were supported to maintain good health and had access to health and social care professionals when necessary. People were supported with shopping and meal preparation where required.

Care was provided in a way that promoted people's dignity and respected their privacy. People received personalised care and support that met their needs and took account of their preferences. Staff were knowledgeable about people's background histories, preferences, routines and personal circumstances. Staff established what people's wishes were and obtained their consent before providing personal care and support, which they did in a kind and compassionate way. Information about local advocacy services was available to help people access independent advice if required.

Staff had developed positive and caring relationships with the people they supported and clearly knew them well. People were involved in the planning, delivery and reviews of the care and support provided. People's personal information was securely maintained within the office.

People were supported to pursue hobbies that they were interested in and that was relevant to their needs. They felt that staff listened to them and responded to any concerns they had in a positive way. Complaints were recorded and investigated thoroughly with learning outcomes used to make improvements where necessary.

Relatives, people and staff were complimentary about the management team and how the service was run and operated. There were systems in place to monitor the quality of services provided. Feedback was obtained and used to make improvements.

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 were protected against the risk of abuse by staff who had been training in safeguarding.

Risks were assessed and reviewed to help keep people safe.

There were sufficient numbers of staff available to meet people's needs.

People were supported by staff who had been recruited using a robust process.

People were supported to manage their medicines safely.

Is the service effective?

Good ●

The service was effective.

People received support from staff who had received training to support them in performing their roles.

Staff sought people's consent before providing care and support.

People were supported to enjoy a varied and healthy diet.

People were supported to access health care professionals when required.

Is the service caring?

Good ●

The service was caring.

People were treated with kindness and respect.

Staff had a good understanding of people's needs and responded accordingly.

People's dignity and privacy was respected and maintained.

Is the service responsive?

The service was responsive.

People's care was responsive to their individual needs.

People were supported to be involved in decisions about their care.

People were supported to engage in social pursuits and hobbies of interest to them.

People's concerns and complaints were properly investigated

Good ●

Is the service well-led?

The service was well-led.

People were positive about how the service was operated and had confidence in the staff and the management team.

The provider had systems in place to monitor the quality of the service and drive improvements.

Good ●

Home Instead Senior Care - Watford

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 was meeting the legal requirements and regulations associated with the Health and Social Care Act 2012, to look at the overall quality of the service and to provide a rating for the service under the Care Act 2014.

The inspection was carried out on 30 March and 7 April 2016 and was announced. Before the inspection we reviewed all the information we held about the service, including notifications which they are required to send to CQC to inform us about specific events that happen within the service. We requested feedback from commissioners and other professionals who have experience of this service.

During the inspection we spoke with seven people who were being supported by the service, two relatives, seven members of staff, the care manager and provider. We also requested feedback from health care professionals familiar with the service and the people they supported. We looked at care plans relating to five people who used the service, four staff files and other information which related to the overall monitoring of the service.

Is the service safe?

Our findings

People told us they felt safe being supported by staff who worked at the service. One person said, "I feel safe living in my own home and am reassured to know the care staff are coming in, they are so reliable, and never let me down." Another person said, "I feel very safe, I have no concerns about my safety at all."

Staff had received training in how to protect people from potential abuse and we saw that there was information displayed in the office with relevant contact details should care staff have any concerns. Staff had a good understanding of what constituted abuse and were clear on how to report concerns both internally and externally if this was required. One member of staff told us "I would not hesitate to report any concerns immediately and I know they would be addressed by the provider and manager".

People had their individual risks assessed and care plans were developed to ensure that risks to health and welfare were mitigated where possible. We saw that staff worked in accordance with these risk assessments. For example using safe moving and handling practice and following safe medicine administration guidance. Staff were able to describe examples of people's individual risks within their own homes such as environmental and they described how they provided care safely with the sometimes confined spaces of people's homes.

Accidents and incidents were recorded and reviewed to ensure appropriate remedial actions had been taken to reduce the risk of a reoccurrence. The manager told us they that reviewed these to check for themes and trends. However there had been none since the last inspection but the process was in place to monitor this.

People were supported by staff who had been through a robust recruitment process. This included completion of an application form, an interview, a criminal records check and three written references. These checks helped to ensure that staff employed to support people were suitable to work with people in their own homes.

There were adequate staff employed at the service to provide a safe effective service at all times including evening and weekends. We reviewed the rota's and saw that people were assigned care workers from within a small team this provided consistency and people knew who to expect. One member of staff told us "There's good teamwork here, and things have been more settled recently. There had been some staff turnover which had been difficult". The manager told us that staff recruitment was an on-going process.

We saw that where possible staff were allocated work within a geographical area to reduce the time they spent travelling from person to person. The manager told us they were assigned travel time in between visits to minimise the pressure on staff to arrive in good time. This process demonstrated that the provider had risk assessed staffing responsibilities and put measures in place to reduce stress levels.

People's medicines were managed safely. Staff had received training in the safe administration of medicines and competency checks were in place including unannounced spot checks which senior staff undertook in people's homes. Medicines were being stored safely within peoples own homes and administered in accordance with the prescriber's instructions. Medicine administration records were completed correctly and these were checked by senior staff and brought back to the office once completed for safe storage.

Is the service effective?

Our findings

People who used the service told us they felt the care and support they received was appropriate and delivered in line with their individual needs. One person told us "I don't know what kind of training the staff receive but they are all very good and seem to know what they are doing. One member of staff told us "we get all the information we need from care plans and risk assessment and we also have a handover with a member of staff who is already familiar with the person's needs". The manager told us "We often sent a senior care worker in initially to help complete the assessment and to establish peoples routines and preferences so that when the person is introduced to their regular care worker we have captured all the important details about how the person wished to be supported".

Staff told us they attended an induction when they started working at home instead and there was continuous training and refresher training provided as required. New staff also had an opportunity to 'shadow' more experienced staff and observe their practice. One member of staff told us some of the training they had completed included topics around health and safety, moving and handling, fire safety and safeguarding adults. Staff told us they were tested following completion of the training to make sure they understood and were able to demonstrate a satisfactory level of knowledge. Training records confirmed that staff received a varied training programme and that the training was updated appropriately. In addition to the routine training specific training was available for example care of people living with dementia to assist staff gain a wider knowledge and understanding of the medical and health conditions of some of the people they supported.

We noted that people's consent was obtained and had been recorded in their care plans. Staff told us they always asked for consent before care and support was provided. Staff and management demonstrated an understanding of the Mental Capacity Act (MCA) 2005 in relation to obtaining and reviewing people's consent.

We saw evidence that staff received regular support and supervision from their manager. Staff told us they were well supported and could always speak to the provider or manager to obtain guidance or advice. One member of staff told us that "The manager is very supportive we can call or come into the office anytime. There is always a senior manager available outside office hours so you are never working in isolation. Staff also told us they had regular team meetings, which gave them an opportunity to discuss all aspects of their work, share information and receive updates about the service from the provider. This helped them to provide an effective service to the people they supported.

Staff told us that although they sometime supported people with shopping meal planning and preparation most people were able to either do this independently or were supported by family members. Staff told us they always made sure people had adequate supplies of food and drinks available to them. People's food preferences were recorded in their care plan and staff demonstrated a good knowledge of people's likes and dislikes.

People were supported to maintain their health and well-being and staff told us that sometimes family members accompanied people to health and GP appointments but if they required the care staff to support

them they were happy to do this. One person told us that the care staff made and took them to a recent GP appointment. Staff said they made sure people accessed healthcare when required.

Is the service caring?

Our findings

People we spoke with told us they were very happy with the care they received and one person said "they are lovely the care staff, I have had a few different ones but they have all been superb". Another person told us "yes I do think they are caring they always have the time to sit and have a chat and are interested in what I have to say". Staff demonstrated that they knew people very well and when they told us about people they described in detail how they supported people. Staff spoke in a kind and sensitive way and one member of staff told us "I treat people how I would like my Nan to be treated".

Everyone we spoke with during the inspection gave positive feedback about staff being kind and caring. One person said "I really do look forward to (name) coming they are like a ray of sunshine". During our time in the office we heard conversations between staff and people who use the service observed interactions between staff members and observed them to be caring and considerate to each other and when discussing people they supported they were respectful and mindful of people's privacy and dignity.

Staff demonstrated a good understanding of the needs and wishes of the people they supported. For example we observed staff discussing a person who they had just assessed and were talking about which staff member had the skills, similar interests and personality to match the person they had assessed. Staff told us this was important to make sure people were able to develop meaningful relationships with the staff that supported them.

People were given choices about who supported them and were actively involved in the development and review of their care and support plans. Care was developed in a personalised way and was delivered in a way which suited the person and was non- intrusive to other family members. One relative told us "they are so thoughtful, if I am around they respect my presence, but if I pop out they sit and have a chat and a cup of tea with (relative)." Relatives told us "We are always kept well informed about my relatives support and we have a copy of the care plan in [Relatives] home, if we have any questions we can ask any time but usually I don't need to as I am always informed by the staff if anything changes.

People were supported to access independent advocacy services if required to offer advice and support. One person told us that when they were considering care options for their relative they had spoken with an advocate who assisted them by providing very useful advice and support. Staff were able to describe how they supported people in a way that respected and maintained people's privacy and dignity. For example while supporting people with personal care they ensured the persons privacy was maintained.

Confidentiality was maintained at the service which meant that information held about people's health support needs and medical histories was kept secure. During the inspection we noted that staff accessed documents for us to review and when we had finished they were then locked away securely.

Is the service responsive?

Our findings

People's care and support needs were provided in a way that suited them and met their changing needs. One person told us, "I like the idea that I can stay in my own home and continue to be as independent as possible, but have the reassurance of knowing the carers will support me with the things I can't manage so well anymore". Another person told us, "I am very pleased with the standard of care. My needs are being met very well." A relative said, "I cannot think of anything else that they don't already provide, really this is one of the best agencies we have had".

People's care plans were personalised and paid attention to detail. They gave clear guidance to staff on how to support people. The manager told us we try to gather as much information as we can about the person, their lifestyle and aspirations so that care plans can be comprehensive and contain sufficient detail to enable staff to be totally responsive to all their needs. Staff we spoke with were able to describe in detail all the important things about the people they supported. For example one staff member told us (person) likes to get up and have a cup of tea before being assisted with washing and dressing, they then like to sit and relax with their breakfast. If people's health or ability changed staff reported this to the office and a review of their needs was initiated. Senior staff told us the service was increased or decreased depending on what their reassessment highlighted. This demonstrated that the service responded to peoples changing needs.

People were encouraged to maintain relationships with family and friends and staff were respectful about peoples choices for example one member of staff told us they supported a person who had a specific religious needs and they assured as far as possible that with support the person was able to maintain that aspect of their life. People were also encouraged to follow any interests or hobbies and were supported to make their lives as fulfilled as possible.

People were aware of how to raise a concern or make a complaint if they needed to. The manager told us they welcomed complaints and used them positively as a way of learning and improving the service that was provided. We saw that complaints were properly investigated and responded to in a timely way. One person we spoke with told us, "I have never had to make a complaint personally but I do know that the manager would take it seriously and do whatever they needed to in order to address any shortcomings. We also saw that people were encouraged to give feedback through surveys and care staff told us they would communicate any concerns to the appropriate person in the office but things always get resolved before they escalate to a complain. For example, one person said they had been unhappy about the changes in care staff and that the office staff had addressed this feedback straight away. One person told us the office staff are very good at keeping us informed if staff are running late for example and this avoids frustrations occurring.

Is the service well-led?

Our findings

People were positive about the way the service was managed and operated. The provider led by example supported staff and was open and inclusive. The culture of the service was to provide excellent care to people and it was clear the management team had a clear vision for the development of the service. Staff told us they met regularly to discuss all aspects of the service and all staff we spoke to felt respected and consulted about the service delivery. There were regular team and staff meetings where everyone had an opportunity to contribute. These meetings provided all staff with opportunities to discuss current service users, any changes or concerns and share positive experiences.

There were several quality assurance systems in place. These included audits and obtaining regular feedback from people who used the service and staff. Spot checks were carried out in people's homes to check that staff arrived on time, followed the care plan and treated people with dignity and respect. Where issues were identified, actions were put in place to address shortcomings. For example, where there had been changes to people's needs gaps in care plans were identified and actions put in place to update these and demonstrate when a review had taken place or when changes had been implemented.

We saw the results of the latest survey which demonstrated people who used the service and staff were very positive about the service. For example 100% of people gave positive feedback about the care they received. A high percentage of people said they would recommend the service and people confirmed that staff who supported them 'went the extra mile'.

Staff were very people and quality focused and were clear on what their roles and responsibilities were. Staff told us they felt valued and at their staff meetings there was always positive recognition of their achievements for example one staff member had received positive feedback from a person who used the service, another had increased their availability in response to a change in the needs of a person who used the service. Staff told us that they found it motivating to be part of such a forward thinking organisation.

All the staff and managers we spoke with told us they worked well as a team and supported each other. One staff member told us that "good and happy staff translates into happy customers " We are all working here because we really care for the people we support and we are able to give a quality of service with a minimum of an hour visit we don't have to rush we can spend quality time with the people we support.

Staff told us they were happy in their work and one staff member said "it is a fantastic place to work, I love it." The manager was very positive about the staff team and told us, "The staff are brilliant; they do a fantastic job and are passionate about the people in their care. We saw that numerous compliments had been received by the service and these were shared with staff concerned. Issue too were shared so that all staff could participate in achieving continuous improvements to the service.