

Mr & Mrs MF Joomun

Biffins Care Home

Inspection report

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Southend On Sea
Essex
SS3 9JB

Tel: 01702292120

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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

The Inspection took place on 24 April 2017 and 2 May 2017 and it was unannounced.

Biffins Care Home is registered to provide care and accommodation for up to 14 older people some of whom may be living with dementia. When we inspected there were 13 people living in the service.

At the last inspection, the service was rated good and at this inspection we found the service remains good.

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.

People received a safe service and were protected from the risk of harm. There were enough staff that had been safely recruited to help keep people safe and meet their needs. Medication management was good and people received their medication as prescribed.

People were cared for by experienced, supported and well trained staff. The service supported people to have as much choice and control over their lives in the least restrictive way possible. People received sufficient food and drink to meet their needs and preferences and their healthcare needs were met.

Staff knew the people they cared for well and were kind, caring and compassionate in their approach. People were encouraged and supported to remain as independent as possible. Staff ensured that people were treated with dignity and respect and their privacy was maintained at all times.

People were fully involved in the assessment and care planning process. Their care plans had been regularly reviewed to reflect their changing needs. People were encouraged and supported to participate in a range of activities to suit their individual interests. Complaints were dealt with appropriately in a timely way.

People were positive about the quality of the service. The care manager, registered manager/provider and staff were committed to providing people with good quality person centred care that met their needs and preferences. There were effective systems in place to monitor the quality of the service and to drive improvements. The service met all relevant fundamental standards.

Further information is in the detailed findings below.

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.

Biffins Care Home

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 inspection took place on 24 April 2017 and 2 May 2017 and was unannounced. The inspection was carried out by one inspector and an expert by experience. An expert by experience is a person who has personal experience of using or caring for someone who uses this type of care service.

We reviewed information that we hold about the service such as safeguarding information and notifications. Notifications are the events happening in the service that the provider is required to tell us about. We used this information to plan what areas we were going to focus on during our inspection.

During the inspection we used the Short Observational Framework for Inspection (SOFI). SOFI is a way of observing care to help us understand the experience of people who could not talk with us.

We spoke with eight people, the registered manger, the care manager, one health and social care professional and five members of staff. We reviewed four people's care files, four staff recruitment and support files, training records and quality assurance information.

Is the service safe?

Our findings

At this inspection we found the same level of protection from abuse, harm and risks to people's safety as at the previous inspection and the rating remains good.

People told us they felt safe living at the service. One person said, "I feel nice and safe here, it's a nice friendly home with nice friendly staff too." Another person told us, "I do feel safe here and they look after me well." Staff demonstrated a good understanding of how to protect people from the risk of harm. One staff member said, "I would ensure that the person was safe and report it straight away." Staff were aware that they could report any safeguarding concerns to CQC and/or the local authority. There were clear policies, procedures and guidelines for staff to refer to when needed and safeguarding issues had been dealt with appropriately. Risks to people's health and welfare were well managed. We saw how staff supported people with their mobility when walking around the home. There were risk assessments and management plans in place to minimise any risks to people's health, safety and welfare. Staff described to us how they kept people safe. One staff member said, "There are risk assessments in people's care files that explain what their risks are and they tell us how to make sure that we keep them safe."

People told us there were sufficient numbers of staff to meet their needs. One person said, "The girls all come quickly when I use my buzzer and if they are busy helping someone else they at least come and let me know they will come back to me." Staff told us, and the duty rotas confirmed that there were enough of them to care for people safely. The service had a robust recruitment process in place where all of the appropriate checks had been carried out before staff started work.

Medication was well managed. We carried out a random check of the medication system and observed a medication round. We found that the system was in good order with clear completed records and we saw that medication was administered appropriately. People told us, and we saw that they received their medication in good time and that staff didn't rush them. Staff had been trained and had their competence to administer medication regularly assessed. People received their medication as prescribed.

The service was clean and hygienic and the care manager had carried out regular checks to ensure that infection control practices were adhered to.

Is the service effective?

Our findings

At this inspection we found staff had the same level of skills, experience and support as they did at the previous inspection and the rating remains good.

People were cared for by staff who said they felt supported and valued. Staff told us, and the records confirmed that they had regular supervision and appraisals. One staff member said, "I have plenty of opportunity to discuss any issues at supervision and at staff meetings and I can always talk to the registered manager/provider or the care manager if I want to." People told us they felt that staff were well trained. Staff said, and the records confirmed that they had received a wide range of training appropriate for their role which had been regularly updated. One staff member said, "We do a lot of e-learning, but we had face to face training for the first aid course." A number of staff said they liked e-learning and that it gave them the knowledge they needed to care for people appropriately. Staff told us, and the records confirmed that they had been encouraged and supported to attain a qualification in care. People were cared for by well trained staff.

People who lack mental capacity to consent to arrangements for necessary care or treatment can only be deprived of their liberty when this is in their best interests and legally authorised under the Mental Capacity Act 2005 (MCA). The procedures for this in care homes and hospitals are called the Deprivation of Liberty Safeguards (DoLS). We checked whether the service was working within the principles of the MCA, and whether any conditions on authorisations to deprive a person of their liberty were being met. Staff had been trained, and they demonstrated a good understanding of the MCA and DoLS and appropriately described how they would support people in making decisions. Where necessary, appropriate DoLS applications had been made to the local authority.

People were supported to have sufficient to eat and drink and to maintain a balanced diet. The lunchtime experience was pleasant and the tables were laid out nicely with place mats, cutlery, condiments and cloth serviettes with napkin rings. The tables looked out onto a nice garden and there were flowers on each of the tables making it an attractive place to eat. We heard friendly chatter between people and staff throughout the mealtime. Most people were able to eat their meal independently; however, one person required support and a staff member provided it in a polite, kind and sensitive way. Where required people's dietary intake had been recorded and their weight monitored to ensure that had enough food and drink to keep them healthy. People told us, and the records confirmed that staff supported them to attend routine health appointments to help them maintain their health.

Is the service caring?

Our findings

At this inspection we found that people were still cared for by kind, caring and compassionate staff and the rating remains good.

People told us they were treated with dignity, respect and kindness by all staff and we saw kind and compassionate care being delivered throughout our visits. One person said, "I do like the carers, they have nice smiles. All the girls are ok here, they're really lovely." Another person told us, "All of the staff are fine with me, they know me well and do a good job." Staff provided people with a supportive and caring place to live.

People told us they were actively involved in making decisions about their care and support. Staff told us that relatives were kept involved in people's care, with their consent. One person said, "I am always able to decide what I want to do. Staff offer me a choice of meals and I decide when I want to go to bed and when I want to get up." Another person told us, "It's my choice what I do here." People's care plans provided good information about their preferences and described how they wanted staff to care for them.

Staff promoted people's independence and encouraged and supported them to retain this as much as possible. For example one person told us, "I had a really high bed when I first came here and I spoke with the care manager and they organised a lower mattress for me. I can get out of bed and get up on my own now so I feel more independent as I can get up and have a wash myself." We saw people being appropriately supported to move around the service during our visits.

People told us they were supported and encouraged to maintain relationships with their families and friends. The care manager told us that visitors were welcome at any time and people confirmed this. Where people did not have family members to support them to have a voice, they had access to advocacy services. An advocate supports a person to have an independent voice and enables them to express their views when they are unable to do so for themselves.

Is the service responsive?

Our findings

At this inspection we found that people still received personalised, responsive care that met their individual needs and the rating remains good.

People's needs had been fully assessed before they moved into the home and their care plans had been devised from the assessment process. Care plans had been regularly reviewed and updated to reflect people's changing needs. They described people's likes and dislikes and provided information about their background to help staff to care for people in a way that they preferred. The care plans included detailed risk assessments to inform staff how to minimise risks to people's health and well-being. People told us that they were happy with their care plans and they felt that staff met their needs appropriately. One person told us, "I like to go to my room around nine or 10pm and get up about 7.30am and I always have toast for my breakfast. I am happy with that." Other people told us they chose when they wanted to go to bed and get up and this was recorded in their care plans.

People were seen to be enjoying activities such as word search, puzzles and crosswords. Although there was an activities schedule most people chose what they wanted to do on the day. People told us that they watched films, listened to music and read newspapers to enable them to keep up with world events. One person said, "I like to get up early so the staff wake me up at 6am. I get up and have a cup of tea and read the newspaper in peace before others get up." People were supported to practice their faith and local pastors visited the service monthly to ensure that people's religious needs were met.

People told us that the care manager and the registered manager/provider took their concerns seriously and resolved matters quickly. One person said, "I tell them when things are not right and they sort it out for me." There was a good complaints process in place and the last complaint received in March 2016 had been investigated fully and responded to appropriately. The care manager told us that they monitored complaints and looked for any trends to enable them to make improvements to the service.

Is the service well-led?

Our findings

At this inspection we found that the service still provided people with a well led good quality service and the rating remains good.

There was a registered manager in post. The registered manager/provider and the manager promoted an open, positive person-centred culture. Staff shared their vision to provide people with high quality person-centred care. There was an open and inclusive culture where people, their relatives and staff felt they could raise issues with management at any time.

People said they were encouraged to give their views and opinions and the records showed that discussions had taken place where the food, the care and activities were discussed. People had also been asked for ideas about how they felt that the service could be improved. Staff told us, and the records confirmed that they had taken part in regular meetings where they had the opportunity to raise any issues such as training, care practices and health and safety.

The quality monitoring system was effective. The care manager carried out a monthly self-audit to check on a range of areas such as the environment, staffing, infection control, health and safety and dignity. They also completed daily checks on the medication system to ensure that people received their medication correctly. A local authority monitoring visit took place in March 2017 and the report showed a score of 86.5% which showed people were receiving a good service. A health and social care professional said they felt the service was well led and that staff provided people with good quality care. We saw that there were written compliments from other professionals such as a district nurse, patient transport services and a church minister. These included, "Very caring efficient care manager." And, "The level of support, care and willingness to go the extra mile for everyone is the best." And about one particular staff member, they said, "Without exception [staff's name] is one of the best carers I have met, totally professional and extremely caring."

The registered manager carried out annual quality assurance surveys where feedback had been sought from people who use the service, their relatives and interested professionals. The 2016 survey was positive and where improvements were needed the registered manager had an action plan in place and was working towards addressing the issues raised.

People's personal records had been stored safely in locked offices when not in use but they were readily accessible to staff, when needed. The care manager and the registered manager/provider had access to up to date information. This was shared with staff to ensure that they had the knowledge to safeguard people, protect their well-being and provide them with a good quality service.