

Fiftytwo 7 Care Ltd

Home Instead Stourbridge

Inspection report

147A Worcester Road
Hagley
Stourbridge
West Midlands
DY9 0NW

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Tel: 01562885589

Website: www.homeinstead.co.uk/stourbridge

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 inspection was announced and took place on 17 December 2015. We gave the provider 48 hours' notice of our intention to undertake the inspection. This was because the service provides domiciliary care to people in their own homes and we needed to make sure someone would be available at the office.

Home Instead Stourbridge is a domiciliary care agency registered to provide personal care to people living in their own homes. At the time of our inspection 27 people received care and support services.

There was a registered manager in place who is also the registered provider. 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 safe and cared for by staff who had a good knowledge of the different types of potential abuse to people and how to respond. People had their individual risks assessed and had plans in place to manage them. Medicines were administered by care staff that had received training to do this. The provider had procedures in place to check that people received their medicines as prescribed to effectively and safely meet their health needs.

Care staff had been recruited following appropriate checks on their suitability to support people in their homes and keep them safe. The provider had arrangements in place to make sure that there were sufficient care staff to provide support to people in their own homes. People told us they received reliable care from a regular team of staff who understood their preferences for care and support.

People told us they were supported by staff to make their own choices and decisions about their care and support. People were actively involved in how their care was planned and their needs met. Staff understood they could only care for and support people who consented to being cared for. People told us that they were happy with the way in which care staff supported them with preparation of meals. People received a diet which reflected their choices and met their needs.

People received care and support from staff who responded to people's individual needs. People told us that staff were caring and supportive and they were treated with privacy and dignity. People were supported by staff to maintain their independence and care was reviewed to support this.

People were encouraged to share their opinions about the quality of the service through reviews and visits with the management team and satisfaction questionnaires. People said staff listened to them and they felt confident they could raise any issues should the need arise and that action would be taken.

People were positive about the care and support they received and the service as a whole.

The provider ensured regular checks were completed to monitor the quality of care that people received and look at where improvements could be made.

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 received care from staff that understood how to keep them safe and minimise the risk of potential harm.

People were supported by a sufficient number of regular staff who supported them with their medicines.

Is the service effective?

Good ●

The service was effective.

People received care in the way they wanted and from staff who were trained to support them.

Care staff had a good understanding of their responsibilities and sought people's consent before providing care.

Is the service caring?

Good ●

The service was caring.

People told us they received care from staff that were kind and caring.

People received care in a way that supported their privacy and dignity and maintained their independence.

Is the service responsive?

Good ●

The service was responsive.

People received care that was responsive to their needs and when they needed it.

People who use the service felt staff and management were responsive and there were regular opportunities to feedback about the service.

Is the service well-led?

Good ●

The service was well led.

People and staff were complimentary about the service and had their views listened to.

Staff felt well supported by the registered manager and had opportunity to train and develop.

People benefited from a service which was regularly monitored because the provider had systems in place to check and improve the quality of the service provided

Home Instead Stourbridge

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 took place on 17 December 2015 and was announced. The provider was given 48 hours' notice because the location provided a domiciliary care service. The provider can often be out of the office supporting staff and we needed to ensure that someone would be in. At the time of our inspection 27 people received care and support services. The inspection team consisted of one inspector.

Before the inspection the provider completed a Provider Information Return (PIR). This is a form that asks the provider to give some key about the service, what the service does well and improvements they plan to make. As part of the inspection we also asked the local authority if they had any information to share with us about the home. The local authority is responsible for monitoring the quality and for funding some of the people receiving care support.

We spoke to five people who used the service and two relatives by telephone. At the service we spoke with the registered manager and provider, five members of care staff and one relative who was visiting the office. We looked at the care records of three people to see how their care was planned. We also looked at three staff files, staff performance spot checks, quality assurance records, client audit reports and the complaints and compliments logs.

Is the service safe?

Our findings

All people we spoke with told us they felt safe with the staff coming into their homes and providing care. One person said "They keep me safe, there's no doubt about it." Two people we spoke with told us they felt assured that all carers were introduced to them before providing care. One person said, "They introduce people first, so they are not a stranger. It's very reassuring for me." One relative told us, "[Relative's name] is 100% safe. I have peace of mind."

All staff we spoke with had a good understanding of the types of abuse people could be at risk from and confirmed that they had received training in safeguarding people. One staff member told us about the safeguarding training they had received and how it had made them more aware about the different types of abuse. They shared examples of what they would report to management or other external agencies if required. Staff told us they would report any concerns with people's safety or welfare to the registered manager and were confident they would take action.

Both staff and people using the service told us that staff referred to care plans including the risk assessments before providing care. All staff we spoke with were able to tell us the different risks to people and how they supported them. One member of staff said, "I always ensure that the environment is safe and free from obstructions and that any medication is safely locked away." People's risks had been assessed when they first received care from the service and had then been reviewed regularly and changes recorded in care plans.

All people told us that they usually had the same staff who arrived on time to provide their care, unless there were changes for holidays or sickness. They said that staff were reliable and this reassured them. One person told us, "I have a team of carers (staff). They never send someone you don't know." People receiving care told us there were sufficient numbers of staff available to meet their needs and staff confirmed this too. One person told us they received a weekly schedule telling them which staff would be supporting them.

We saw records of employment checks completed by the provider to ensure staff were suitable to deliver care and support before they started work. The provider had made reference checks with previous employers and with the Disclosure and Barring Service (DBS). The DBS is a national service that keeps records of criminal convictions.

Two people told us they received support with their medicines. One person told us, "I'm very happy with the help." Staff confirmed they had received medication training and were able to give us examples of the actions they had taken when someone refused their medicines. One member of staff told us, "I would explain why the medicine was needed and if they still refused I would record the reason why and notify the office." Checks of the medication record sheets were made to ensure staff had correctly recorded the medicines they had given to people.

Is the service effective?

Our findings

All people we spoke with told us that staff knew the care they needed. One person told us, "They know what to do; they certainly know what's what." This was confirmed by a relative, who told us, "Staff are well trained."

Staff we spoke with told us that training helped them to do their job. All five staff confirmed that the training was good and that the provider gave access to specific training. For example, a training course where staff put on glasses to replicate failing eyesight and wore gloves to replicate the difficulty in handling small items. One member of staff said the course gave an understanding of people's experiences. Each member of staff was able to give an example of how training had impacted on the care they provided. One member of staff explained how dementia training had improved their communication with people living with dementia by, "Stepping into their reality."

All staff told us they received regular supervisions from managers, which gave them the opportunity to discuss any issues or request further training. In addition regular spot checks were made by supervisors to observe their care practice. Staff told us they were provided with feedback from the person receiving care and their supervisor.

We checked whether the service was working within the principles of the MCA. 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.

People can only be deprived of their liberty to receive care and treatment when this is in their best interests and legally authorised under the MCA. We checked whether the service was working within the principles of the MCA.

People had been able to consent to their care and were involved in care planning and reviews and had signed to confirm they had been included in the writing of the plan. Where people needed support with their decision making the registered manager told us the provider had a system in place and told us of the actions that would be taken. For example, speaking to the people who knew them well. Four of the staff we spoke to told us they were aware of their responsibilities to ensure people's consent to care and treatment was sought and recorded.

Where people were supported with the preparation of meals, they told us support was good. All staff we spoke with told us about the importance of giving people choice, which was also confirmed by the people we spoke to. People told us they got to choose their meals and staff listened to them. One member of staff said although they knew a person's favourite foods, "I still ask what they fancy." Another member of staff

told us they supported one person who liked to cook their own meals. They told us they prepared the ingredients first and then supported the person to complete the meal. One member of staff told us how they supported a person who had lost weight and was on a specialist diet. They ensured high calorie meals were prepared and that the person was encouraged to eat.

Staff demonstrated that they knew when to contact outside assistance. For example, one person told us how the member of staff would do their morning call would seek advice or call the GP if they were unwell. Records showed when staff had contacted other health professionals, for example, GP, dentist or occupational therapist in the support of people's healthcare needs and the actions taken. For example, increased drinks were encouraged for one person following the advice of their GP.

Is the service caring?

Our findings

People spoke positively about both the support they received and the staff that provided it. One person told us they staff were, "Very, very caring." Whilst another person told us they, "Couldn't say a bad thing about them, they've come in as friends, it's great." One relative told us, "Support is given with a lot of care. Staff are unbelievably caring."

One person told us how they had a good relationship with the staff, they said, "I've never had a carer I don't like. They are all very pleasant and I get on with them all." Another person told us, "I feel sad sometimes; they (staff) do cheer me up and make me laugh."

The registered manager said that where possible the service looked to match staff to people with similar interests for example, a shared love of animals. This gave the person receiving support and the staff a topic of interest to talk about. One person said, "The carers have similar interests, a lot of them have pets which is really important to me." Another person told us, "They match the carers, it certainly makes things more compatible. I consider them friends now."

People told us they preferred receiving care from the same staff although they understood this was not always possible with annual leave and sickness. One person told one of the strengths of the service was that staff were, "Completely reliable." Information on the staff making the calls was provided in a schedule given in advance each week by the provider.

We saw that people were involved in planning their care. One relative told us, "[Persons name] is quiet, but they listen to her views." Care records held instructions in the way people wanted their care delivered and these records were signed by the person receiving care to confirm their agreement.

Staff we spoke with were well motivated to provide good care, one member of staff told us, "I thoroughly enjoy my work. I respect I'm going into someone's house and it's important not to take over." Staff told us by providing care to the same people they could build up relationships with people and get to know them and their families. Two members of staff told us they felt the policy of a minimum of one hour calls meant they had time to chat to people and get to know them better.

Staff spoke warmly about the people they supported and provided care for. One member of staff said, "They are like family to me." Another told us, "Staff genuinely care and build relationships." Staff we spoke with were able to detail people's needs and how they gave assurance when providing care. For example, when one person was anxious staff talked to them about their previous work and this helped support them.

During our conversations with staff, they were able to tell us about the people they supported and their likes and dislikes. One member of staff said, "It's the little things that are important to a client, for example if they like milky tea." Staff told us how they respected people as individuals and how they involved people in their day to day care, which promoted their independence. This was confirmed by the people we spoke to, one person told us how staff helped them by leaving a meal ready for them to prepare when they wanted it.

People we spoke with also confirmed that they were treated with dignity and respect. One person said, "They keep things private and don't gossip." A relative told us, "I trust them with [relative's name] they treat them with respect, keep things confidential." Staff confirmed this and one member of staff told us, "It's about your approach, you ask would you be okay to get washed now?" They also described how they respected people's privacy by closing doors, turning away when appropriate and using towels to cover people up and keep them warm. Two people we spoke with confirmed that staff respected their home. One person said, "They leave everything nice and tidy and the way I like it."

People confirmed they were able to express their views on the care provided and felt listened to. One person said, "[Member of staff] came last week. She often comes and checks and makes sure everything is okay." Another person told us, "They do what I want, my opinion matters."

Is the service responsive?

Our findings

All people we spoke with said they received the care they wanted. They told us that they were involved in planning their care and any reviews. One person told us, "They know me. They know where everything is, they don't need telling". Another person told us, "I like to chat. I chat to the carers on all sorts of subjects. They bring the outside world and family life into my home which I really appreciate."

People told us the service responded to any requests for changes. For example, one person said, "I had a carer that didn't suit. Other staff picked this up and I spoke to the office and adjustments were made. It was gently adjusted for me." Another person told us when they wanted a change they rang the office and, "It was changed from the time I told them."

People told us and we saw that care plans were reviewed regularly and that they had been involved in the reviews. One person told us, "They often come to see me and check, they make sure all is okay." We saw that when one person's health had improved the service had responded by reassessing the person's needs and reducing the number of calls. Care records were updated and included notes on people's background, activities they enjoyed and food preferences.

One relative told us how a whiteboard had been used by carers to help their relative. The board showed pictures of the staff so their relative would know who was coming and the carers updated it to show the day and what the person would be doing. The relative said this information, "Helped orientate [relative's name]," and, "Certainly helped."

Staff said good communication systems were in place to advise them of any changes. Once they received an update they had to confirm with the office it had been received and read. They said communication was discussed at team meetings to ensure all staff were updated.

All staff told us care plans included the most recent information and these would be updated to reflect any changes in a person's care. We saw that when a new medication had been prescribed to a person receiving care, records had been updated and all staff that supported the person were advised of the change.

Staff demonstrated a detailed knowledge of the people they cared for and how they supported them in the way they wanted. One person told us about when their care was first assessed they said, "They asked what I want, and that's what I get." One relative told us, "The thing that stands out is their attention to detail. I told them something once and they just did it from then on."

The provider had a procedure for people to raise complaints should they have them and two complaints had been received over the past 12 months. We saw that complaints were logged, investigated and responses made. All the people we spoke with told us they had not had reason to complain but were aware of how to raise concerns. One person told us, "They tell me I can complain but I don't need to." Another person told us, "If I had a problem I would complain, don't you worry. I've had no problems it's a good service." A relative said, "I would complain if I had a concern. I know the routes to follow." People we spoke

with told us they felt assured that action would be taken as necessary.

Is the service well-led?

Our findings

All people we spoke with were very positive about the service they received. One person told us, "It's excellent, I couldn't wish for better," and a relative said, "It's an excellent service, I've got no complaints at all." Three people told us that they knew the managers and they were very approachable. One relative told us, "They (the managers) are customer focused and take on what you are saying."

Staff also spoke positively of the management team. They told us they felt listened to and supported with one member of staff saying, "If there's ever a problem they are always available and they are pretty good at taking action." Another member of staff told us, "When I call in I've never had to leave a message as there's always an answer."

The registered manager felt that all staff worked well as a team. Staff confirmed this with one member of staff telling us, "I'd give the staff support ten out of ten, it's very good." Another told us, "It's a good team that genuinely cares for people." They also confirmed they were well supported by the registered manager.

The service had received a number of compliment cards from people and their relatives. The registered manager logged these and passed on the thanks and comments to individual staff. We saw that where one member of staff had been praised by a relative they had received a 'Going the Extra Mile' (GEM) award. The registered manager told us this was a small gift that was awarded to staff in recognition of excellent care. The award was not limited to one member of staff and was awarded at team meetings. One member of staff said, "The service recognise the contribution you make, I feel valued."

There was a registered manager in place who is also the registered provider. They told us that as a branch of a franchise, they had access to quality compliance staff, a business manager and legal and human resource staff. The franchise company also held meetings at which providers could share good practice. The provider told us they valued these meetings and they provided learning and support and helped improve the service.

All staff told us they felt able to tell management their views and opinions at staff meetings. One member of staff said, "They are really valuable. They get the team together and allow us to share ideas. It's good to learn from other staff." We saw that staff meetings covered areas such as any issues staff had, new procedures and training. Minutes were made available for those staff who were unable to attend.

The registered manager told us as staff were out in the field they produced a newsletter every two months as a way of keeping in touch with the team. The newsletter gave messages to staff, news stories and updated them on recruitment.

The registered manager also told us that they looked to make links with the community and had recently done a charity event to plant flowers in the local area. They also provided useful information to people receiving the service. For example, details on nuisance telephone calls and steps to take to stop them.

The provider had systems were in place to check and review the service provided. When a person first started to use the service there was a telephone call after 48 hours to check they were satisfied. A quality assurance visit was made after two weeks and the system continued with three monthly checks and six monthly reviews. One person told us the managers, "Go through things and check all is okay." Whilst a relative told us, "Reviews are every six months and they do listen to us."

The provider used external agencies to check people's and staff members overall views. The questionnaire for people using the services was responded to by 27 people and the results had been positive. Where people had made comments these had been shared at a team meeting and were also printed and displayed in the office.

The staff questionnaire was responded to by 22 members of staff. The results were positive and showed staff were proud to work for the service and would recommend it as a place to work. The registered manager said they were looking to use the outcome of the questionnaire to improve staff engagement and were currently looking at staff incentive schemes.