

Miss Claire Louise Webber

Tendring Care

Inspection report

22a Telford Road
Clacton on Sea
Essex
CO15 4LP

Tel: 01255317071

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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 11, 12 and 13 January 2016. Tendring care is a domiciliary care agency (DCA) based in Essex which provides domiciliary care services predominately in Clacton on sea.

The service has a registered manager. 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.

There were systems in place which provided guidance for staff on how to safeguard the people who used the service from the potential risk of abuse. Staff understood the various types of abuse and knew who to report any concerns to.

There were procedures and processes in place to ensure the safety of the people who used the service. People were safe because staff understood their responsibilities in managing risk. Where people required assistance to take their medicines there were arrangements in place to provide this support safely.

Staff respected people's choices and took their preferences into account when providing support

There were sufficient staff who had been recruited safely and who had the skills and knowledge to provide care and support in ways that people preferred.

Training records for staff showed that essential training, covering a variety of topics, had been undertaken including induction training.

Staff members received regular supervisions; the manager told us annual appraisals would be conducted of care workers performance once they had worked at the service for one year. This showed that appropriate systems were in place to support staff to do their job.

There was a clear management structure in place which staff understood. Staff were aware of their role, responsibility and accountability in relation to the provision of services.

People told us they knew who and how to contact the service if they had a concern or complaint

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.

Staff understood how to protect people from harm and abuse.

There were enough staff to support people in a safe way.

The service had effective systems in place to ensure that the recruitment of staff was safe. This included required background checks, references and identity checks.

Staff supported people to take their medication safely

Is the service effective?

Good ●

The service was effective.

Staff were supported to do their job and completed a training programme to ensure that they had the knowledge and skills to care for people who used the service.

People's needs were assessed before they began using the service and care was planned in response to these.

Is the service caring?

Good ●

The service was caring.

Care was provided in a caring and respectful way.

People's rights to privacy, dignity and independence were respected and valued by staff.

People were involved in making decisions about their care and the support they received.

Is the service responsive?

Good ●

The service was responsive.

People were regularly involved in reviewing their care and support provided by the service to ensure it met their needs.

People were aware of the complaints procedure and appropriate systems were in place to manage complaints.

Is the service well-led?

The service was well-led.

Procedures were in place to monitor and review the safety and quality of people's care and support.

Staff were supported and felt able to raise concerns and issues with the registered manager.

Additional support, practical training and supervision was provided to staff to increase the quality of care delivered when needed.

Good ●

Tendring Care

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.

The inspection took place on the 10th, 11th and 12th January 2016 and was announced. We told the provider 48 hours before our visit that we would be coming. We did this to ensure the manager was available as they could be out of the office supporting staff or people who used the service.

The inspection was completed by two inspectors.

Before the inspection we reviewed the information we held about the service, including the Provider Information Return (PIR) which the provider completed before the inspection. The PIR is a form that asks the provider to give some key information about the service, what the service does well and improvements they plan to make. We also reviewed the information we held about the service including safeguarding alerts and statutory notifications which related to the service. Statutory notifications include information about important events which the provider is required to send us by law.

On the day of the inspection we met the manager at their office and spoke to one member of staff. After the inspection site visit we spoke with a further six members of staff and five people who used the service on the telephone. We also visited four people in their own homes and spoke with the staff who were present at those visits. We reviewed seven care records, training records, four staff recruitment and support files and records which related to the management of the service.

Is the service safe?

Our findings

People told us that they had no concerns about staff's ability to provide care safely. One person said, "I could not ask for more, they make me feel very safe."

The provider had up to date safeguarding and whistleblowing policies that gave guidance to staff on how to identify and report concerns they might have about people's safety. Whistleblowing is a way in which staff can report concerns within their workplace. Staff knew about safeguarding people, what constitutes abuse and the action that they must take. One staff member told us, "If I see anything I report it straight away."

Staff we spoke to with demonstrated a good understanding of these processes and were able to tell us of actions they would take if they were concerned about a person's safety. One member of staff told us, "The manager is always on the end of the phone to ask for help or advice."

People's care and support was planned and delivered in a way that ensured their safety and welfare. An environmental risk assessment had been completed as part of the service's initial assessment process to help staff identify and minimise any potential risks in the person's home.

There were also basic individual risk assessments for each person to monitor and identify any specific areas where people were more at risk. For example these assessments included those for risks associated with people being supported to move, falling, the environment, smoking and self-medication. The risk assessments had been reviewed and updated regularly or when people's needs had changed.

The provider had recruitment processes in place and they completed all the relevant pre-employment checks, including Disclosure and Barring Service (DBS) reports for all the staff. DBS helps employers make safer recruitment decisions and prevents unsuitable people from being employed. Staff files also contained two references, some of these did not include a reference from a previous employer, the manager was able to tell us the reason but this was not recorded on the staff file.

There were sufficient staff employed to keep people safe. People who used the agency and their relatives told us that there were enough staff to provide their care needs. One person told us, "They ask me what I want and when I want it, you could not ask for more." Staff told us they had sufficient time to deliver the support required. If they experienced any difficulties completing their schedule they would inform the manager who would then arrange extra support. The Manager also had a good knowledge of the geographical area and ensured travel distances were taken into account when planning visits.

People confirmed that they were always supported by the number of staff identified as necessary in their care plans. A member of staff told us, "There are always two of us if this is required."

People who used the service were very complimentary about the quality of the staff that provided care, and told us they were supported by a consistent group of staff which helped provide continuity of care. We saw that there was a good system in place to manage the staff rotas. Staff told us there were always enough of them to support people at the times of their choosing. One person told us, "I cannot fault the agency; I

always have the same carers. It makes my day seeing them every day."

Some people or their family members managed their own medicines and they told us that they did not require staff support with this. The records we saw for those supported by staff to take their medicines, showed this had been done safely and people had been given their medicines as prescribed. We also saw that staff had been trained appropriately to manage people's medicines safely and they also received additional support from the manager when required.

Is the service effective?

Our findings

People told us they thought their regular care workers were competent, understanding and knew what they were doing. One person told us, "Carers will support me with anything I need." Another person told us, "They are very flexible as I work but they change their times when I need it." A third person told us "If I am stuck they always help."

One member of staff told us, "I had six weeks training prior to starting work, then I shadowed for two to three weeks." Another staff member said, "The service is very good regarding training and preparing us for the work we do. I have done lots of training on many things such as medicines, person centred care and safeguarding. Staff records showed that training was provided on a regular basis and areas covered included medicines, infection control, health and safety, safeguarding, person centred care and the role of a care worker.

Staff confirmed they received regular supervision sessions which they found supportive. Records showed that supervision was conducted on a regular basis. The manager told us annual appraisals would be conducted of care workers performance once they had worked at the service for one year. In addition we saw that spot check visits were undertaken by the manager within the community, and she regularly went out with carers to support them and observe.

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.

Some staff had an understanding of the Mental Capacity Act (MCA) and the importance of consent but others were less clear, at present most people who used the service had capacity. The Manager was considering developing her staff's knowledge in this area. During our visits to people's homes we observed staff offering people choices and giving people time to respond.

The service also provided domestic care to people within their own home and care staff were involved in supporting people with their food shopping. One person told us, "They do take me shopping and if I am stuck, they will always help." Relatives and people told us that care staff supported them with preparing meals. People told us that the care staff offered choice when preparing meals. One person told us "The food is my choice, but they cook it." All staff had received basic food and hygiene training. People told us staff sought consent before care was provided. One relative said, "They always ask and they prepare [person's] drinks and sandwiches of her choice."

People and their relatives told us that most of their health care appointments and health care needs were co-ordinated by themselves or their relatives. However, staff were available to support people to access healthcare appointments if needed, and liaised with people involved in their care if their health or support

needs changed. One person told us, " We discuss {person's} care and they respond to any requests." Another person told us "They have called an ambulance when I was unwell, and they made sure I was okay."

Is the service caring?

Our findings

People said that staff were caring and they were treated with dignity and respect. One person told us, "I like the same carers and the manager organises this." Another person said, "They are lovely and always make me feel comfortable." And another person and their relative told us, staff are really caring and do their jobs well, believe me if I had a problem I would report it, but I don't. This is the best agency by far that we have had." Relatives also told us that staff were, "Very caring"

People had also written how they felt on quality assurance questionnaires. Comments included, "The best thing I ever did was get these carers in as my family can see the difference in me."

Staff told us they provided the support that people needed but were aware of retaining people's dignity. One staff member said, "It's important to find out how people want things done whenever possible. We should care for people how we would like to be treated." One person told us, "They always make me feel comfortable".

People and relatives told us that they had regular care staff who supported them and with whom they had built relationships. Staff also confirmed that they had been working with the same people for some time and had got to know their likes and dislikes. One member of staff told us, "I really like the fact that I see the same people each week and the manager organises this. "People who used the service were able to name their regular carers."

Peoples and relatives told us that they had been involved with their care planning process and were also involved in the reviewing process when necessary. One person said, "I have read my care plan and it is accurate." People could express their views and participate in the decisions regarding their care arrangements. People told us that the service provided flexibility for people which met their needs or lifestyle. One person who still works told us "I am happy with this service they are flexible, I decide what I want and when and they provide it."

The staff that we spoke to demonstrated their understanding around equality and diversity One staff member told us that, "I have not really had a client from another culture but I would check how they liked things done and always ask first."

During our visits to people in their own homes we observed staff interactions with people. We saw that people were very relaxed with staff and it was clear that positive and supportive relationships had developed between care staff and people who used the service and their relatives. People were observed chatting amiably with staff, confident in their presence, sharing jokes and generally happy to have their company.

Is the service responsive?

Our findings

People and relatives told us staff were flexible and available at different times throughout the day. People told us that they always received a regular carer. A person told us, "The manager always introduces me to any new carers first." Another person who uses the service told us, "there is nothing they will not do for me; they always fit in around my [specialist] treatment."

People told us that staff listened to them respected their choices and decisions. People confirmed that they were involved as much as they wanted to be in the planning of their care and support.

The registered manager explained the initial process for assessing people before they used the service. They met with the person and where appropriate family members. They told us this was to determine what the person's support needs were and whether the service was able to meet those needs. We saw completed pre assessments on people's files. These included information about people's needs in relation to personal care, communication, and their daily routines and also information about their medical history and condition.

Care plans were in place which were based upon the initial assessment of needs. People had access to a copy of their care plan. We saw that care plans had been signed by the person or their family member where appropriate. This showed people were involved with, and agreed to their care plan. Care plans were basic, but current and had been evaluated regularly. Care staff recorded their daily interaction which included detail about how the person was and the tasks that were completed.

All of the staff we spoke with talked about people who used the service in a polite and respectful way. They also told us they believed that it was a fundamental aspect of their work to build and maintain positive and open relationships with those they supported and their families. During our visits to people's homes we were able to see how carers responded to people's individual needs. One person told us, "We are getting the service we want, rather than the service someone wants to provide."

The manager had systems in place to support people to express their views about the service. People told us that staff sought their opinions of the service and the provider had conducted a survey recently of people's views. We noted that most feedback was complimentary about the Service.

The service had a complaints policy in place and care plans also contained information for people on how to make a complaint. People and relatives told us they knew who to contact if they had a concern or complaint and everyone we spoke to referred to the manager by name as the person they would talk to. Staff knew they needed to report all complaints to the registered manager. People told us they had no complaints but would feel comfortable raising issues and concerns and were confident they would be addressed appropriately.

A comment found on one care plan included information where a person had asked for a change of carer

and this had been actioned immediately by the manager. We discussed this with the manager and how the service dealt with minor concerns.

Is the service well-led?

Our findings

The service was managed and owned by the registered manager and her partner. People were provided with information about the service and of how to contact the office. Comments from people and their relatives included, "Out of all the agencies we have used they are the best. They seem to really care," and, "The manager is excellent, very helpful and caring. She is very good, and she listens." One other comment was, "I have had very poor experiences in the past with other agencies but I am very happy with this one, we cannot fault them," and, "They are very flexible."

The service provided to people was person centred and the manager told us it was a small service and they were therefore able to provide a personal service. People who used the service told us they got a good service and were happy with all aspects of the agency. There was an open culture within the service.

Staff we spoke with were aware of the whistle-blowing policy and said that they would not hesitate to report any incidents of concern. Another staff member said, "If I saw or knew about any poor care or bad practice I would report it to the manager and I would be confident that it would be acted upon without any hesitation or delay."

Staff told us the manager listened to them and provided them with the support they needed as well which included keeping them informed about any changes to the service. The registered manager told us she kept in regular contact with staff face to face and by telephone. Staff told us "I am happy working for the agency," and, "The manager is always available, she visits people and will help with anything." The registered manager carried out visits to people's homes to review the quality of the service provided to people and as an additional support for direct care.

Policies and procedures were available and recently reviewed, we looked at a sample of policies including those that related to safeguarding, complaints and medicines and found they were relevant, up to date and applicable to the service.

The registered manager was aware of their responsibilities to notify the Care Quality Commission (CQC) and other agencies of incidents that affected the safety and wellbeing of people who used the service. Due to the service being very small no notifications had been received at the time of the inspection. However, conversations with the registered manager assured us that they would report any incidents in a timely manner when the need arose

The service carried out an annual survey to seek the views of people that used the service and their relatives. The survey asked about various elements of the service provided. The most recent survey took place in September 2015. Completed surveys were returned and we saw these all contained positive feedback about the service.

Feedback included, "I receive excellent care at all times. Tendring Care is an extremely reliable and flexible care company. I have had many care companies provide support workers and none of them offer what I require, flexibility, reliability and of course the necessary care. I work and have an active life, so flexibility and

reliability are extremely important attributes. There are many care companies around but not many are reliable or flexible."