

# Trial-Link Limited

# Jubilee Court

## Inspection report

1-5 Eversley Road  
Bexhill On Sea  
East Sussex  
TN40 1EU

Tel: 01424211982  
Website: [www.jubileecourt.com](http://www.jubileecourt.com)

Date of inspection visit:  
19 December 2016  
20 December 2016

Date of publication:  
09 February 2017

## 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?	Requires Improvement ●

# Summary of findings

## Overall summary

The inspection of Jubilee Court took place on 19 and 20 December 2016 and was unannounced.

Jubilee Court provides accommodation and care for up to 29 people. At the time of our inspection 24 people were living at the home. All people at Jubilee Court were living with dementia and mental health type illnesses. People had various long term health care needs including diabetes and other conditions which impacted on mobility putting people at risk from falls.

Jubilee Court was on three floors with nine bedrooms on the first and second floors and eight bedrooms on the ground floor accessed by a lift. The ground floor included a kitchen, dining room with access to the garden, a main lounge and a quiet lounge.

There was a registered manager at the home. A registered manager is a person who has registered with the Care Quality Commission (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 2008 and associated Regulations about how the service is run.

Throughout our inspection, people spoke positively about the home. Comments included, "I love this home. I love all the people and all the staff." and, "I'm very happy here." Although staff knew people well and had a good understanding of their individual needs and choices there were some inconsistencies of detailed written information which could leave people at risk of receiving care that was inappropriate or inconsistent. This had not been identified through the quality assurance system. We made a recommendation about quality assurance systems being applied consistently.

People told us they felt safe living at Jubilee Court. There were sufficient levels of staff to protect people's health, safety and welfare. The provider had improved staffing levels based on the dependency of people's needs.

Medicines were managed safely including PRN medication. The provider had put in place clear guidance for staff on the administration of PRN medicines.

People were provided with a choice of healthy food and drink ensuring their nutritional needs were met. Staff encouraged and supported people to eat and drink well. One person said, "The food is the best thing about living here."

Staff knew the individual personalities of people they supported. We saw staff were kind, compassionate and patient and promoted people's privacy, dignity and choice. People were encouraged to be as independent as possible and we saw friendly and genuine relationships had developed between people and staff. One person said, "Staff are kind and very considerate. I have no problems." A staff member told us, "I treat the residents like family. I would be happy to have my mum here."

Training schedules confirmed staff had received training in safeguarding adults at risk. Staff knew how to identify if people were at risk of abuse or harm and knew what to do to ensure they were protected. Staff had received regular supervisions with their manager to discuss additional training needs and development. Staff were encouraged to attend further training, with the majority having achieved Level 2 National Vocational Qualification (NVQ) in health and social care.

Robust recruitment and selection procedures were in place and appropriate checks had been undertaken before staff began work and staff received a range of training that enabled them to support people living at Jubilee Court.

People's health and wellbeing was monitored and staff regularly liaised with healthcare professionals for advice and guidance. A visiting healthcare professional told us, "I feel safe about the residents' care here."

The Care Quality Commission (CQC) monitors the operation of the Deprivation of Liberty Safeguards (DoLS) and to report on what we find. We found appropriate policies and procedures were in place. The registered manager was familiar with the processes involved in the application for a DoLS, and had made the necessary applications to the authorising authority. Where people lacked the mental capacity to make decisions the home was guided by the principles of the Mental Capacity Act 2005 (MCA) to ensure decisions were made in the person's best interests.

People's friends and family were made welcome and relatives made positive comments about the service. One relative commented, "I have every confidence in the level of care and treatment of residents."

## 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.

Risk to people had been assessed and managed.

Staffing levels were sufficient to keep people in the service safe.

Checks had been completed on staff to ensure they were suitable and safe to work with people at risk.

Staff had a clear understanding of the procedures in place to safeguard people from abuse.

Medicines were stored, administered and disposed of safely.

The premises and equipment at the service was well maintained.

### Is the service effective?

Good ●

The service was effective.

Staff had received training and regular supervisions to carry out their role.

Staff had a basic understanding of the Mental Capacity Act 2005 and Deprivation of Liberty Safeguards. Senior staff knew what they were required to do if someone lacked the capacity to understand a decision that needed to be made about their life.

People were provided with food and drink which supported them to maintain a healthy diet. Staff protected people from poor nutrition and dehydration.

People were supported to have access to healthcare professionals when they needed it.

Staff understood people's health needs and responded when those needs changed.

### Is the service caring?

Good ●

The service was caring.

Staff had a good understanding of the history, likes, preferences and needs of the people who used the service.

Staff communicated effectively with every person using the service.

Staff had built a rapport with people and treated them with kindness and respect.

Care plans were personal to each person and included detailed information about the things that were most important to them.

Confidential information was held securely and there were policies and procedures to protect people's confidentiality.

### Is the service responsive?

**Good** ●

The service was responsive.

People received consistent, personalised care and care plans were reviewed regularly.

People's changing needs were identified and reviewed regularly.

People decided how they spent their time, and a range of activities were provided depending on people's preferences.

Personalised information regarding people's daily routines was available to assist staff in supporting people with their preferred choices.

Concerns and complaints were responded to appropriately.

### Is the service well-led?

**Requires Improvement** ●

The service was not consistently well-led because records did not consistently include detailed information about the care people needed or received.

Incidents and accidents were documented but not always analysed to identify trends to prevent reoccurrence.

Feedback from people, relatives and staff were gathered however where suggestions for improvement had been made there was not always an action or response recorded.

The home had a registered manager who provided clear leadership and support.

Quality Assurance audits were undertaken to ensure the safe running of the home.

---

# Jubilee Court

## 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 19 and 20 December 2016. This was an unannounced inspection. The inspection team consisted of two inspectors.

We focused on speaking with people who lived in the home, speaking with staff and observing how people were cared for. As some people had difficulties in verbal communication we spent time observing to see the interactions between people and staff. We used the Short Observational Framework for Inspection (SOFI). SOFI is a specific way of observing care to help us understand the experience of people who were unable to talk to us.

We looked at care documentation and reviewed records which related to the running of the service. We looked at six care plans and five staff files, staff training records and quality assurance documentation to support our findings. We looked at records that related to how the home was managed. We also 'pathway tracked' people living at Jubilee Court. This is when we look at care documentation in depth and obtain views on how people found living there. It is an important part of our inspection, as it allowed us to capture information about a sample of people receiving care.

We looked at areas of the home including people's bedrooms, bathrooms, lounges and dining area. During our inspection we spoke with seven people who live at Jubilee Court, seven staff and the registered manager. We also spoke with three visiting health care professionals including an occupational therapist, a district nurse and a local GP.

Before our inspection we reviewed the information we held about the home, including the Provider Information Return (PIR). This is a form in which we ask the provider to give some key information about the service, what the service does well and improvements they plan to make. We considered information which had been shared with us by the local authority and members of the public. We reviewed notifications of

incidents and safeguarding documentation that the provider had sent us since our last inspection. A notification is information about important events which the provider is required to tell us about by law.

The service was last inspected in September 2014 and no areas of concern were identified.



# Is the service safe?

## Our findings

People were safe because staff were very clear about what they should do to keep people safe. Care workers and the registered manager had a good understanding of what they needed to do to safeguard people. One person said, "I feel safe. This is a nice little home."

People told us they felt safe because there were sufficient numbers of staff to meet people's individual needs. There were four care staff on duty in the morning and afternoon and three staff at night. The registered manager told us that the staffing levels were based on individual dependency. The dependency of people was reflected in the care plans based on their fluctuating care needs. The registered manager told us, "Our care workers don't do cleaning as this is done by the domestic staff which means the carers have more time for the residents. I will be increasing the staffing levels in the morning to five so that the residents get more one to one time with staff." The service used a keyworker system and each member of staff had overall responsibility for the welfare and safety of two to three of the people who used the service. The registered manager said, "We want the keyworkers to spend more quality time with their key residents." A healthcare professional told us, "It is really useful for there to be a named person who knows the resident well."

Staff told us, "I think there are enough staff but more staff would mean we could spend more time with the residents." In addition to care staff there was a head cook, a second cook, a housekeeper, two domestic staff and a maintenance person employed at the home. One staff member told us, "Our staffing levels change when our residents' needs change. I do get time to sit and chat to residents and if I thought we needed more staff I would let the management know." We saw that staff responded quickly to the needs of people and call bells were answered promptly. Staff had time to sit with people without the need to rush. There were enough staff to meet the needs of people living at Jubilee Court and these were assessed and monitored regularly.

People told us that they received their medicine as prescribed and in a kind and safe way. There were appropriate arrangements in place for the safe receipt, storage, administration and disposal of medicines to ensure people received their medicines safely. A lockable trolley was used to store medication which had thermometers inside to ensure that the medication was stored at the right temperature. Medicines were supplied in blister packs. We checked that medicines were ordered appropriately and medicines which were out of date or no longer needed were disposed of safely.

People's medicine administration records (MAR) were accurate and clear. They showed each person had an individualised MAR which included a photograph of the person and any allergies. MAR charts are a document to record when people received their medicines. We observed three separate times when people were given their medicines and they were given safely. Staff had a good understanding of people and the medicines they required. There was clear guidance in the MAR charts on as required (PRN). PRN medicines are only given when people required them and not given routinely for example for pain relief or anxiety.

Care plans showed each person had been assessed before they moved into the home and potential risks

identified. People's care documentation contained assessments such as risk of falls, skin damage, nutrition and moving and handling. They provided specific guidance for staff on how to manage risks, for example what equipment would be required. These were reviewed on a monthly basis. One staff member told us, "The keyworker monthly review allows us to spend time with the resident and make sure that any changes to a person's needs are documented and that we are doing everything we can to prevent falls, encourage independence and ensure that we reduce the risk to people while they move around the home."

Staff had received safeguarding training and knew who to contact if they needed to report abuse. They gave us examples of potentially abusive care and were able to talk about the steps they would take to respond to it. One staff member told us, "It is so important for us to keep the residents safe. If I have any concerns I report them to the registered manager." Another member of staff told us about an occasion when they reported serious concerns and this was dealt with appropriately by the registered manager. Policies and procedures on safeguarding were available in the office for staff to refer to if they required.

Staff files included relevant checks on staff suitability including completed application forms, two references, employment history and a Disclosure and Barring Service (DBS) check. These checks identify if prospective staff had a criminal record or were barred from working with children or adults. This ensured that only suitable people worked at Jubilee Court.

All staff had received fire safety training and a fire safety policy and evacuation plan was in place. A fire risk assessment had been carried out on 20 July 2016 and all of the recommendations from the assessment had been completed. Two simulated evacuations had been completed in 2015 to ensure that day and night staff were able to confidently support people in the event of a fire. Staff knew where to assemble when the alarms sounded and there were individual personal evacuation plans (PEEPS) for all of the people living at Jubilee Court. These identified the support and equipment people required during an evacuation. One person who required maximum assistance in the event of a fire had been moved to the ground floor.

People were cared for in an environment that was safe and clean. People were able to move safely around the home with walking aids and the floors and corridors were clear of obstruction. The housekeeper completed a three monthly health and safety check of the whole building to ensure people's safety was maintained. There were regular servicing contracts in place including checks on the lift, gas, moving and handling equipment and electrical appliances. One person told us, "The lift works well and if it breaks down they usually fix it within 24 hours." Maintenance was carried out regularly with additional checks completed on radiators, pressure mats, water temperatures and fire equipment. A Legionella risk assessment was completed on 20 September 2016.

The service had an emergency recovery plan which provided emergency contact telephone numbers in the event of electrical, water and catering disruption, gas supply failure and heating loss. This provided details of where people would be relocated in the event of an emergency.

## Is the service effective?

### Our findings

People received effective care because staff were well supported with induction, training, supervision and appraisal. Staff received training in safeguarding, moving and handling, fire safety and infection control. They completed an induction when they started working at Jubilee Court and 'shadowed' experienced members of staff until they were competent to work unsupervised. The registered manager told us, "I am a qualified trainer and moving and handling instructor so some of the training I can deliver in-house. Staff complete their induction and complete at least three shadow shifts with a senior carer or the head of care. If we don't feel they are confident or if the member of staff doesn't feel confident we will ask them to do more supervised shifts." A member of staff said, "We receive a lot of training from the manager, sometimes the owner and also outside companies."

Staff also received specific training to meet people's needs, for example dementia care, challenging behaviour and pressure area care. One staff member told us, "I like learning different things and I am currently completing my NVQ Level 3 in Health and Social Care." Another member of staff said, "I have just signed up to complete the NVQ Level 5 in Health and Social Care. I am very 'hands on' and want to know about everything." Staff we spoke to and observed demonstrated a good understanding of dignity and dementia. Staff were patient and kind in their interactions with people.

Staff received regular supervisions so that the management team could develop staff and monitor the effectiveness of the training that they had completed. Staff told us that supervisions were a good reminder of best practices and ensured that they were up to date with the latest procedures and guidance. One staff member said, "The supervision is an opportunity to discuss the care we provide, our accuracy in record keeping, how well we communicate with residents, what training needs we have and our overall approach to work." In addition to supervisions staff were observed regularly in relation to people's care, assisting people with eating, assisting people with toileting and moving and handling. This ensured that staff demonstrated the right skills, knowledge and attitude to give people a consistent level of care that met their needs.

People told us they liked the food at Jubilee Court, one person said, "The cook comes round daily and gives a choice. We get a good meal here." The head cook told us, "All of the food is homemade from fresh ingredients and we have four weekly menus. If someone doesn't want any of the choices I will cook whatever they want if I have got it. I make all my own cakes, pies and sauces and I regularly sit down with residents and ask them about their preferences. We also have specific dietary needs such as pureed food for people with swallowing difficulties and diet controlled diabetes which we cater for." Jubilee Court's food hygiene rating was five following an inspection on 15 March 2016.

People were provided with enough to eat and drink. They were offered breakfast, lunch, afternoon tea and a light supper. People were regularly offered drinks, fruit and snacks throughout the day. People were able to have their breakfast when they chose. A member of staff told us, "As a staff team we do our best for the residents. We want them to eat well." One person told us, "I had a fried breakfast this morning but usually I have Weetabix or Shredded Wheat. I love breakfast."

We observed the lunch time meal service on both days of our inspection. People either ate in their rooms, the dining room or in the lounge. There were five dining tables which were well presented with soft drinks and condiments. We saw that plate guards were used by some people to assist them to eat independently. Staff ensured that people were positioned comfortably at their table and interacted in a respectful and supportive manner. One person told us, "The food is excellent. I'm diabetic so I get a special pudding. Staff do a blood test four times a day to check my sugar levels." We observed a member of staff supporting one person to eat in the lounge. The member of staff was patient and did not rush the person in any way. The head cook was also available to support people in the lounge and was an integral part of the team.

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 so that they can receive care and treatment when this is in their best interests and legally authorised under the MCA. The application procedures for this in care homes and hospitals are called 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. Policies and procedures were available to staff on the MCA and DoLS. These provided staff with guidance regarding their roles and responsibilities under the legislation. One staff member told us, "We do a lot of training on the MCA. I am not involved with the best interest meetings but I know that this is about the capacity of residents and putting protections in place for those people who do not have capacity." DoLS applications had been applied for many people and mental capacity assessments were in place for all of the people at Jubilee Court.

Staff demonstrated they had knowledge and understanding of how to support people to maintain good health. People had been referred to a range of health care professionals, these included dietitians, District Nurses and Speech and Language Therapists (SALT). We spoke with one visiting health professional during the inspection. They visited the home quite often and were positive about the home and the staffs' responsiveness. They said, "I come and see three people who live here and from my perspective they are doing their best. Everything that I ask them to do is followed up and staff are always happy." One person told us, "If I am sick they will call the GP straight away." Healthcare professional visits were noted in the care plans. The deputy manager told us, "We are regularly in contact with the community psychiatric nurses, district nurses, GPs and the SALT team. We also have a dentist and an optician who visit the home every year to check people's oral health and eyesight."

# Is the service caring?

## Our findings

People were treated with kindness and compassion in their day-to-day care. People stated they were satisfied with the care and support they received. One person said, "You can't have everything perfect in life but I'm perfectly happy here." Another person told us, "I'm quite happy here. If there is anything you want you only have to ask. They are friends." Our observations confirmed that staff were caring and kind in their attitude and behaviour to the people they supported.

There were similar comments in the feedback from a relatives' survey from January 2016. One relative had written, "Jubilee Court is an excellent care home and a credit to you. The staff are always welcoming and easy to approach." Other comments included, "super friendly staff" and "the staff are very attentive and supportive."

There was a calm and relaxed atmosphere at Jubilee Court. A staff member told us, "I love working with residents. In my opinion it's a nice place to work." Another staff member told us, "I really like the friendly atmosphere here." One of Jubilee Court's objectives in the service's statement of purpose was to, "foster an atmosphere of care and support which both enables and encourages our residents to live as full, interesting and independent a lifestyle as possible." One person told us, "There is a very good atmosphere and it's constant." Another person said, "I'm no longer lonely. It's just a good place to be. I'm happy and glad to be here." A member of staff told us, "Working as a team we make sure the residents have a quality of life. Dignity, respect and compassion."

People were supported to spend their day as they chose. Interactions and conversations between staff and people were positive and there was friendly chat and good humour. One person said, "They get me up at 5am every day and that's what I want. I have a shower when I want and my clothes and room are spotless. I have loads of visitors and they come any time." Another person said, "Sometimes I go out on my own and sometimes I go out with a member of staff. The staff are always kind." Staff made time to talk to people whilst going about their day to day work. One person who was sat in the lounge started to sing and clap their hands. This prompted another person to start singing and staff encouraged others to sing along.

Staff were aware of the importance of providing the right level of support to ensure that people's needs were met, but also to enable them to do as much for themselves as possible. We saw staff encouraging people with walking aids to move to different parts of the building safely. Staff were patient and took time to support them if necessary. One member of staff told us, "If people can do it themselves we encourage them to do it. We ask whether they would like to do something rather than do it ourselves. It is important to promote independence as much as possible."

Staff always knocked on people's doors before entering and were consistently discreet when offering to provide personal care to people. People's privacy and dignity was well promoted by staff. Staff understood the importance of helping people to be well groomed and dressed appropriately. A hairdresser visited fortnightly, a chiropodist visited every six weeks and people's labelled clothes were washed by the laundry and sorted into baskets to ensure that items of clothing were not lost and returned properly. Staff provided

nail care and hand massages for people if they chose to.

Care plans contained information on people's preferences regarding their end of life decisions. Comments from the relatives' survey described how supportive and considerate staff had been during the end of life of a person at the home. People and their families where appropriate, were involved in their day to day care. Care plans and risk assessments showed they had been consulted on their views of their care and asked what was important to them. The monthly review of care ensured that people were given the opportunity to contribute to their care planning in a meaningful way.

Staff were knowledgeable about individual personalities of people they cared for and supported. Staff shared people's personalities with us during the inspection and they talked of people with genuine respect and affection. One staff member said, "We give residents as much one to one attention as we can. I know them all very well." When staff were attending people they worked at the person's own pace and did not rush them. The deputy manager told us, "We don't use agency staff because our residents know our staff well and strangers can be upsetting to them." We observed a member of staff attending to one person; they took their time and were patient. They did not leave the person until they were sure their needs had been met. Staff chatted with people whilst providing support.

Care records were stored securely in a locked office area. Confidential information including personnel files were kept secure and there were policies and procedures to protect people's confidentiality.

## Is the service responsive?

### Our findings

People told us staff knew them well and were responsive to their changing needs. They said staff attended them promptly when they needed assistance. One person told us, "I have been here over a year and the staff are wonderful. They have a very good team and there is great camaraderie."

People's needs had been assessed before they moved into the home. This was to ensure their needs and choices could be met. People's care plans contained information about personal care, communication, health and social well-being, mobility and mental health in addition to a falls, continence and nutritional risk assessment. Monthly reviews of the care records were completed by staff with people.

Assessments and care plans were completed with the person, and where appropriate, their representative, and included information about their likes, dislikes and choices as well as their needs. Personalised information about individual daily routines was recorded for example what time people liked to get up and what equipment would be required for mobility.

There was a timetable of weekly activities on display in the hallway. These activities included pet pals, quizzes, exercise, arts and craft, reminiscence, nail care and a singer who visited the home twice a month. Activities were individualised for people but the timetable provided activities for those people who wanted to participate. The activities coordinator told us, "I go to people's rooms every day and ask residents what things they would like to do." Three or four residents went out on their own every day, some people were escorted to church at the weekend and some people stayed in their rooms. The activities coordinator continued, "I regularly go to one person's room and we play dominoes and I go to another person and we do gentle exercise. As a result of residents' meetings we will be doing more outings in the New Year. We are going to the De La Warr Pavilion in February for a film matinee." The notice board also showed forthcoming events, the date and the weather. There were also photographs of the day's menu options and a copy of the complaints policy.

One person told us, "We go for walks. We have a quiz. Everybody is geared towards Christmas at the moment." Another person said, "There are always activities going on. I choose not to go down and stay in my room." A staff member told us, "This is their home. We try to accommodate what they want rather than what we want." People were listening to music in the main lounge and care staff were seen talking and chatting with people. There was a relaxed and friendly atmosphere. People had made snowmen with paper and cotton wool during a craft activity which were on display in the dining room. One person told us, "Yes, we made all of those and that picture of penguins." Many of the staff we spoke to felt that there should be more activities for people at Jubilee Court. One member of staff told us, "We have improved the activities that are on offer to residents but I think we can do even more to increase their quality of life."

People were able to provide feedback about their experience of the care they received. Meetings were held every two months. We looked at the minutes of the previous four meetings which showed that people recognised the improvements to activities at Jubilee Court.

A complaint policy and procedure was available. The complaints log showed there had been no recent complaints. A compliments folder showed that feedback received from relatives was very positive and included, "I have every confidence in the level of care and treatment of residents" and "I am delighted with the care and most appreciative."

Relative surveys were completed annually and gave relatives and friends the opportunity to raise concerns and provide feedback. In the last survey dated January 2016 relatives scored subjects positively relating to safety, care, respect, dignity and whether they were happy with the service. Comments included, "It is with great pleasure I am able to confirm categorically that Jubilee Court have been excellent in their care and protection of my brother." and "I would strongly recommend Jubilee Court."

People were given the opportunity to provide feedback. Service user surveys were completed annually. The latest service user survey in January 2016 showed 21 responses were received out of 26. Feedback was positive and any areas of concern were acted upon by the registered manager. Comments included, "I am very happy living here", "I am very happy with all of the staff" and "I love it here."



# Is the service well-led?

## Our findings

Whilst we received positive comments from people we found Jubilee Court was not consistently well-led. People's care plans did not always contain sufficient detail and consistent information staff needed to look after people. This did not significantly impact on people because staff had a good understanding of their needs. However, staff who were not as familiar with people did not have clear reference documents.

A quality assurance audit was undertaken which covered areas such as care plans, staff files, health and safety, medication, catering, housekeeping and maintenance. However, the quality assurance audit had not identified the need for staff to fully document the care and support of people in sufficient detail. For example a decision not to follow some guidance given by a healthcare professional was not documented fully.

The accident and incident records were not always fully recorded and analysed, for example only two of three falls in 2016 documented for a person were transferred to the person's care plan. The falls action plan completed in January 2016 had not been reviewed as a result of the falls. This did not significantly impact on people because staff had a good understanding of their needs. However, the lack of analysis to identify patterns and trends in accidents and incidents could result in delays to referring people to healthcare professionals and preventing reoccurrence.

Care plans including the daily records were clear and consistent to ensure that people received safe and person-centred care. For example, a guidance note at the front of a person's care plan stated that they had "fluctuating capacity to consent and that staff must assess her on a task by task basis to decide whether she appears to understand the consequences of declining assistance." Another care plan stated that staff should not take over any tasks that the person can do themselves to ensure that they are not deskilled.

Staff knew people well and had a good understanding of their individual needs and choices. However, the lack of detailed written information left people at risk of receiving care that was inappropriate or inconsistent. We identified this as an area that needs to be improved. Jubilee Court commissioned an independent consultant who had completed two CQC audits of the service on 25 February 2016 and 8 August 2016 and made recommendations to improve the service. Although some progress had been made many of the recommendations were still outstanding or under review. For example it was highlighted that managers would benefit by spending more time observing care but there was no record of how the service had addressed this or how it had been communicated to staff. This meant communication was sometimes unclear including the responsibility and accountability for things that happen in the service. We recommend the provider seeks further advice from a reputable source about the use of a quality assurance system to continually drive improvement.

Staff surveys were completed annually. The last staff survey in January 2016 was positive with 13 responses out of 25. Staff scored a variety of subjects including their enjoyment of the job, whether management were approachable, whether they felt supported, respected and treated fairly. A minority of comments suggested that some staff did not feel supported in their role and it was not clear or documented whether any action

had been taken to address these issues. Other comments included, "Since I started working at Jubilee Court I have felt management have been very supportive throughout." and "I would like to thank management for the help and support that they have given."

The registered manager worked with staff to provide a good service. We were told by staff that the registered manager was approachable but was sometimes too busy to provide the necessary support that they required. One member of staff told us, "I know that she is busy so I would probably go to the deputy manager." Another member of staff told us, "The deputy manager and the registered manager are both very approachable but I would ask the deputy manager as she is more hands on. Another member of staff told us, "I like the friendly atmosphere. We are a team."

The registered manager had notified us of all significant events which had occurred in line with their legal obligations. The registered manager had a good understanding of the issues that had occurred and demonstrated how she had put measures in place to prevent reoccurrence for example a sensor mat was put in place following a person's recent fall. The registered manager told us that she felt supported by the provider and said, "I can always get him on the phone. He will want a sound reason for doing something but he will listen and take action." One person told us, "The home is run well, that's no mistake."

The housekeeper completed a three monthly service review which inspected all areas of the home and produced a report to the maintenance person to complete any necessary improvements or repairs.

Staff meetings were held sporadically and when required. The last meeting was held on 19 April 2016 and the minutes from the meeting highlighted record keeping, shift planning and a general discussion from the registered manager. The previous written minutes were dated November 2012 but other meetings had taken place but had not been formally written up. Staff told us they were given regular updates on a weekly basis.