

Leonard Cheshire Disability

Cuffley Care at Home

Service

Inspection report

Cuffley Youth Centre
Station Road
Cuffley
Hertfordshire
EN6 4EY

Tel: 01707876197

Website: www.leonardcheshire.org

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25 May 2016

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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

This inspection was carried out on 19 May 2016. We gave the provider 48 hours notice to make sure that the people we needed to speak with were available during our inspection. We also talked with staff and people who use the service on the 24 and 25 May 2016. At their last inspection on 21 November 2013 they were found to meeting the standards we inspected.

Cuffley care at home service provide a care and support service to people living in their own homes. At the time of our inspection, 138 people were receiving support from the service.

The service did not have a registered manager in post. 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 and associated Regulations about how the service is run. The manager for this service is in the process of registration with CQC.

People received care and support that met their needs. There were individual care plans that gave guidance to staff to enable them to deliver this in a way that respected their choices, preferences and promoted their dignity.

People were supported by sufficient numbers of staff who had been recruited safely and had the appropriate skills for their role. Staff received regular support and supervision and the management team shared updates and lessons learned with them.

Staff knew how to identify abuse and risks to people and respond appropriately.

People's medicines were managed safely. Everyone we spoke with was positive about the management of the service and the ethos of the service. Staff knew what was expected of them and people told us that they were all very kind and caring.

There were systems in place to monitor the quality of the service and address any shortfalls. People's feedback was sought and this was responded to appropriately.

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 felt safe using the service and staff knew how to identify and report abuse.

People were supported by staff who had been recruited safely and there were enough staff to meet their needs.

People's medicines were managed safely.

Is the service effective?

Good ●

The service was effective.

People were supported by staff who were trained and supported appropriately.

People's consent was sought before providing care.

People were supported to maintain a healthy and balanced diet.

People were assisted to contact healthcare professionals if needed.

Is the service caring?

Good ●

The service was caring.

People told us that all staff were kind and caring.

People were involved in planning their care and felt respected.

Confidentiality was promoted.

Is the service responsive?

Good ●

The service was responsive.

People's needs were met and care plans gave staff clear guidance to deliver care or support safely and appropriately.

People were aware of how to make complaints if they needed to.

Is the service well-led?

Good ●

The service was well led.

People and staff were positive about the leadership and management of the service.

Staff were kept informed of changing policies, practice and lesson learnt through meetings and a newsletter.

There were systems in place to monitor the quality of the service and address any issues.

Cuffley Care at Home Service

Detailed findings

Background to this inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection was planned to check whether the provider was meeting the legal requirements and regulations associated with the Health and Social Care Act 2014 and to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

We undertook a comprehensive inspection of Cuffley Care at Home Service on 19 May 2016. Before our inspection we reviewed information we held about the service including statutory notifications. Statutory notifications include information about important events which the provider is required to send us. Before the inspection, the provider completed a Provider Information Return (PIR). This is a form that requires them to give some key information about the service, what the service does well and improvements they plan to make.

The inspection was undertaken by one inspector. We gave the service 48 hours' notice to ensure that the registered manager would be available to meet with us. During the inspection we received feedback from 16 people who used the services, eight relatives, six staff members and the manager. We also received feedback from professionals involved in supporting people who used the service. We viewed information relating to five people's care and support. We also reviewed five staff files and other records relating to the management of the service.

Is the service safe?

Our findings

People felt safe using the service. One person said, "I feel very safe with them in my home because of the way they treat me." A relative said, "[Relative] is safe in their care because they do what they say they are going to do."

People and their relatives told us that staff supported them to take their medicines safely. One person told us, "I need reminding to take my medicine. One relative said, "They wash and apply cream to [Relatives] skin and they prompt them to take their medicine and they record everything they do in the book [Daily notes]." Staff had received training and told us they felt confident in this role. People were supported by staff who were aware of how to identify and reports any concerns relating to the risk of abuse. One staff member said, "I would report any concerns to my line manager." Staff were also familiar with how to report to agencies outside of the organisation.

People had their individual risks assessed and staff were familiar with these. Staff told us that they risk assessed people's needs daily with regards to trip hazards and faulty equipment. One staff member said, "If a person's needs start to change we inform the office so they can be re-assessed." Accidents and incidents were logged and the manager told us that they reviewed these regularly and would discuss any areas of concern and ensure all appropriate action had been taken to prevent further risk.

People told us that staff were on time and did not miss calls. One person said, "They [Staff] arrive on time and are very helpful." Another said, "They come on time and if they are running late I get a call to let me know." The manager told us that there were sufficient numbers of staff to meet people's needs. They also commented that they were on a recruitment drive to ensure staffing numbers remained consistent. However, staff felt that people's needs were met but felt that they could do with more staff. We looked at the staff rota and spoke with the co-ordinators. We found that there were enough staff to ensure all visits were covered. Office staff who were trained to provide care were available to support in the event of any shortages that may happen, for example, short notice staff sickness.

People were supported by staff that had been through a robust recruitment process. This included all appropriate pre-employment checks such as references and a criminal records check. The manager demonstrated that they followed safe and effective recruitment practices to help ensure staff they employed were suitable to work in a 'caring environment'. One person said, "They are punctual and stick to the routine but are flexible."

Is the service effective?

Our findings

People told us that they felt staff had the appropriate skills and knowledge for their roles. One person said, "We have confidence in the staff because they are friendly and know what they're doing."

Staff told us they felt confident to perform their roles and had received their training. One staff member said, "We have been supporting our staff through training and the new manager is very pro-active and has introduced a new training matrix to ensure all staff are up to date with their training." Staff confirmed they had received inductions and shadowed experienced staff members when starting work. We saw in staff files each member had a record of induction. The manager confirmed that staff had inductions and received shadowing up to five days or more if required. The manager also confirmed that staff needed to be signed off as competent by team leaders. We saw from minutes of staff meetings that training needs, safeguarding and the mental capacity act was discussed. Staff also told us that they felt supported. We saw that staff received one to one supervision, regular competency assessments and an annual appraisal. One staff member said, "I have had supervision and spot checks." The manager told us that regular spot checks were completed to ensure staff are working to best practice. Staff were also supported to achieve their level two and three in National Vocational Qualifications.

Staff were supported in their roles and as part of their professional development; they were supported to obtain the skills, knowledge and experience necessary for them to perform their roles effectively. This included detailed and specific awareness about more complex needs such as people they supported with dementia.

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.

People were supported to make their own decisions and consent was sought prior to care being delivered. One person said, "They always offer choice, they always ask me what I want." Another person commented, "They speak in a polite kind way, they chat to me all the time and they give me a choice of whether I have a bath or not." One staff member told us, "You need to build up good relationships. I always ask if it's alright to help and always give people choice." One staff member also explained that there were different ways to communicate and that by showing people visually could assist them with making choices. For example, staff held up different items of clothing, to help people make a choice. We also found that the manager was aware of the process to follow to support someone should they require an advocate if they became unable to make their own decisions.

People were given support to eat and drink sufficient amounts. Staff prepared meals and drinks for people and gave encouragement. One staff member told us, "We offer food and drink, one of my [people] I cook a

proper meal. They don't like heated meals from the microwave." Other people we spoke with were independent and supported themselves. One relative said, "The staff always make sure they have food."

Although people were in their own homes and generally independent in regards to health care appointments, they told us that support with this was offered when needed. For example, if when visiting someone they found that they were unwell, they would offer to call the GP. This helped to ensure people's needs were met.

Is the service caring?

Our findings

People told us that staff were kind, friendly and caring. One person told us, "They [Staff] are very helpful and friendly. They are always polite and caring." Another commented, "I think they are better than most carers. The care is very good and they are always cheerful." One relative told us, "The care I witness is good care; we have the same regular staff who are respectful and polite."

People told us they were involved in planning their care and their choices were respected. They told us that they sat with staff to discuss their care. One person said, "We have had the care plan reviewed." One relative said, "They asked us what we wanted we discussed what our needs were. They asked about [Relatives] likes and dislikes and [Relative] was very involved with what they wanted." We were also told by people that if you let them know about appointments they are very flexible and for example, will come earlier to support people's needs.

We were told by people that used the service that staff supported them with dignity and respected their privacy at all times. Staff had developed positive and caring relationships with people they supported and were knowledgeable about their individual needs and preferences. One relative said, "Staff are very caring to my [Relative] they ask is there anything else you would like us to do. They make their food and lay the table they even put out the rubbish bins." One person said, "They [Staff] are very nice [staff]. Treat me alright, no complaints. I would recommend them. They always have time to chat with me; I would miss them if they didn't come."

Staff were able to demonstrate that they understood how to promote independence and treat people with dignity and respect. One staff member said, "I always tell people what I'm doing and check that that's ok. I encourage people to do as much as they possibly can; it enable's people to stay independent and that's important to them." One relative said, "The staff always make my [Relative] laugh and are very kind." One person said, "The care is very good, I have been with them a long time and they are very helpful." We received a lot of positive comments about the way staff supported people.

Confidentiality was well maintained and that information held about people's health, support needs and medical histories was kept secure. Staff understood the importance of maintaining confidentiality.

Is the service responsive?

Our findings

People told us they received care and support that met their individual needs. One person told us, "They help to wash and dress me and they use a hoist to get me out of bed." We saw that when unforeseen changes took place people were supported. For example, one person had to go to hospital at short notice and they contacted the staff at the office. Staff were made aware that the afternoon call had been cancelled but they also put a later call in place to offer support.

People's individual care and support plans were written in a way that enabled staff to provide appropriate and safe care. These included assessments and plans in relation to moving and handling, skin care and washing and dressing. We saw that they included specific details for staff to follow. For example, one person's care plan stated that they required repositioning and to monitor their fluid intake. We spoke to one of the staff who confirmed that this was documented and that the person was also supported by visits from the district nurse. There was good guidance for staff in care plans to enable staff to provide good support. One relative said, "My [Relative] [Has high needs]. The care they receive is very good, the staff bath and wash them and care for them. They [Staff] speak to my [relative] in a dignified way, they talk with them all the time."

People received care, treatment and support from staff that had guidance about people's health and care needs. People's identified needs were documented and reviewed to ensure they received appropriate care.

The manager told us that they only take on people whose needs and preferred times they can meet. However, at times they will offer people alternative times until their preferred times become available. People were supported to have their say the manager told us that there are regular reviews and spot checks where people views are sought to ensure people are happy with the service. The organisation also complete annual surveys and staff confirmed that they would pass on any concerns or grumbles people may have.

There was an electronic monitoring system in place that allowed staff to monitor calls, to ensure people received calls. This was reviewed throughout the day. Where people did not have the facilities to enable staff to log the calls using a telephone system; staff would enter the information on their call sheets and these would be signed by the people who used the service and were audited on a weekly basis to ensure people had received their calls. There was an out of hour's service that meant if people required support there was always staff available. One relative said, "I have called the office out of hours and there is always someone there, the communication is really good."

People were aware of how to make a complaint should they need to. However, everyone we spoke with told us that they were very happy with the service. One person said, "I know how to complain if required, I have their number." Another said, "I have no complaints." We looked at the complaints log and noted that people's concerns and complaints were responded to in line with the service policy. One person said, "I have no complaints, staff listen to me."

Is the service well-led?

Our findings

People told us that the service was well led and they felt listened to. One person said, "I am happy with the service. Another person said, "I know who to call if required."

We found that there had not previously been in place an adequate auditing system to ensure that medicines were been delivered and recorded correctly. However the new manager who had started in March had completed a review of the auditing systems and had identified that this was required. We saw that emails had been sent to all staff explaining the new protocols and requirements for the audits to be done. The manager has confirmed that this process is now in place.

There were systems in place to monitor the quality of the service. We saw that in addition the new manager had completed audits of the service to identify where improvements were needed. There were action plans in place to make these improvements from updating staff files with better indexing systems to making sure that where audits were required these were put in place for medication and daily sheets. These changes were communicated to ensure people were aware of what was required. The systems and processes that were in place demonstrated that the manager was committed to identifying any shortfalls and making continual improvements to all aspects of the service provided.

Staff were also positive about the new manager of the service and felt there was strong leadership. One staff member said, "The new manager is very open and approachable; they will stop what they are doing to make time to listen to you." We were told that the manager had changed all the staff files and had introduced a better filling and index system to make it easier to review. One staff member said, "They have explained what they are doing because they want us to understand how they work and what is expected of us."

The manager was clear about their vision regarding the purpose of the service, how it operated and the level and type of support provided to people. They told us that they considered dependency levels to make sure they could meet people's needs without compromising standards. The manager told us that they looked at people's needs and ensured that they could meet these before accepting any new client.

The office staff were knowledgeable about the people who used the service and about their needs, personal circumstances. For example, we saw staff come into the office and receive guidance from the co-ordinators. One staff member was told how they could access the key for the person's medicines. Staff understood their responsibilities and what was expected of them. The manager was approachable and had an open door policy.

The manager felt supported and they told us that within the last three months, they had meetings with their area manager on a regular basis and this was to be on-going on a monthly basis. They also had quarterly meetings with their area managers. They received phone calls and emails on regular basis to ensure that they were settling in and gain advice and support on any issues or concerns that I may have had.

The manager told us that they have a good team around them that they could lean on and who were more than happy to move with the changes that they were implementing. They also confirmed they had

supervision with their area manager, where they have the opportunity to put forward their plans to discuss and implement where appropriate. They also confirmed they used other outside professional bodies for guidance and best practise.