

Luton Borough Council

Abigail Court (Domicillary Care)

Inspection report

Flat 64, Abigail Court
Abigail Close
Luton
Bedfordshire
LU3 1ND

Tel: 01582721427
Website: www.luton.gov.uk

Date of inspection visit:
31 January 2018
07 February 2018

Date of publication:
24 April 2018

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 announced comprehensive inspection was carried out on 31 January 2018 and was concluded on 7 February 2018.

Abigail Court (Domicillary Care) provides care and support to people living in specialist 'extra care' housing. Extra care housing is purpose-built or adapted single household accommodation in a shared site or building. The accommodation is rented, and is the occupant's own home. People's care and housing are provided under separate contractual agreements. CQC does not regulate premises used for extra care housing and this inspection looked at people's personal care and support service. At the time of the inspection, 15 people were being supported by the service.

There was a registered manager in post. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.

At our last inspection we rated the service 'good'. At this inspection we found the evidence continued to support an overall rating of 'good', and there was no evidence or information from our inspection and on-going monitoring that demonstrated serious risks or concerns. However, we found the provider had made further improvements to their quality monitoring systems to ensure that people received good care. The exceptional leadership and management of the service fostered a culture that encouraged collaborative working and openness. The registered manager provided stable leadership and effective support to the staff. People, relatives and staff feedback was listened to and improvements made in a timely way. The registered manager and the provider had systems in place to turn their vision and values into ensuring that they consistently provided a service that was safe, effective, compassionate and of good quality.

People were safe because there were effective risk assessments in place, and systems to keep them safe from abuse or harm. There was sufficient numbers of staff to support people safely. Staff took appropriate precautions to ensure people were protected from the risk of acquired infections. People's medicines were managed safely, and there was evidence of learning from incidents.

People's needs had been assessed and they had care plans that took account of their individual needs, preferences, and choices. Staff had regular supervision and they had been trained to meet people's individual needs effectively. The requirements of the Mental Capacity Act 2005 were being met, and staff understood their roles and responsibilities to seek people's consent prior to care and support being provided. Where required, people had been supported to have enough to eat and drink to maintain their health and wellbeing. They were also supported to access healthcare services.

People were supported by caring, friendly and respectful staff. They were supported to have maximum choice and control of their lives, and the policies and systems in the service supported this practice.

Staff regularly reviewed the care provided to people with their input to ensure that this continued to meet their individual needs, in a person-centred way. The provider had an effective system to handle complaints and concerns. Where people were able to remain in their own homes, staff ensured that they remained comfortable, dignified and pain-free at the end of their lives.

Further information is in the detailed findings below.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

Good ●

The service remains Good.

Is the service effective?

Good ●

The service remains Good.

Is the service caring?

Good ●

The service remains Good.

Is the service responsive?

Good ●

The service remains Good.

Is the service well-led?

Good ●

The service remains Good.

Abigail Court (Domicillary 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 checked whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

We gave the service 48 hours' notice of the inspection visit because the location provides a domiciliary care service and we needed to be sure that there would someone available to support the inspection. We visited the office location on 31 January 2018 to see the registered manager and office staff, and to review care records, and policies and procedures. The registered manager was on leave on the day of the inspection so we were supported by two team leaders. The inspection was concluded on 7 February 2018 when we received information we requested from the registered manager.

The inspection was carried out by an inspector and an expert by experience. An expert by experience is a person who has personal experience of using or caring for someone who uses this type of care service. Their area of expertise was in the care of older people.

The inspection was informed by feedback from questionnaires completed by four people using the service, two staff, two relatives and three external professionals. This confirmed that everyone was happy with how people's care and support was managed. We discussed with the team leaders some of the issues raised in relation to the decoration of the premises and they were going to discuss this with the housing provider. However, we did not inspect this as we do not regulate premises in these types of care settings.

We used information the provider sent us in the Provider Information Return. This is information we require providers to send us at least once annually to give some key information about the service, what the service does well and improvements they plan to make. We reviewed other information we held about the service including the report of our previous inspection and notifications they had sent us. A notification is

information about important events which the provider is required to send to us. We received positive feedback about the service from the local authority.

During the inspection, we spoke with six people using the service, three care staff, and two team leaders. We also met and spoke briefly with the provider's service manager when we arrived at the service.

We looked at care records for four people to review how their care was planned and managed. We looked at three staff files to review the provider's staff recruitment and supervision processes. We also reviewed training records for all staff employed by the service. We checked how medicines and complaints were being managed. We looked at information on how the quality of the service was assessed and monitored.

Is the service safe?

Our findings

We found the provider continued to protect people from potential abuse, harm and risks, and the rating for this key area remains 'good'.

People told us they were safe with staff who supported them, and none of them were concerned about abuse. One person told us, "What makes me feel safe is that staff who are coming to help me are good staff." Another person said, "I feel safe because staff are knowledgeable of my needs."

Staff had been provided with appropriate training and guidance in order for them to know how to keep people safe. Staff we spoke with showed good knowledge of local reporting procedures. Information about safeguarding was also displayed in prominent areas so that anyone who wanted to raise a concern knew what to do. Records showed that the registered manager had followed local safeguarding protocols to report potential safeguarding incidents.

There were appropriate risk assessments in place to ensure that potential risks to people's health and wellbeing had been assessed. This information ensured that people and staff knew how to mitigate these risks. One person with limited mobility told us, "When I am sitting, the buzzer is close to my chair, and they check if it's working. This makes me feel safe." The person added, "I have never had any accidents because I take my time and use grips as advised." This showed that appropriate action had been taken to ensure that risks were assessed and effective systems and equipment put in place to reduce the level of risk.

Records showed that there were safe staff recruitment procedures, and there was sufficient numbers of staff to support people safely and at their agreed times. People confirmed that they had always been supported at their agreed times.

People's medicines were managed safely in order for them to receive effective treatment, and people we spoke with were happy with how staff supported them with their medicines. One person said, "I receive my regular medications on time. I once took wrong medications when I was on my own." The person told us that they were happy that they now received support with this.

People were supported in a way that ensured they were protected from risks of acquired infections. Everyone told us that staff wore gloves and aprons when required, and followed appropriate hand washing procedures. One person said, "Staff who come to help me wear aprons and gloves, and that's very safe for me."

There was an electronic system to record incidents that occurred at the service and these were reviewed by the registered manager and other senior managers. Records showed that there was learning from incidents and effective systems were put in place to reduce the risk of them happening again.

Is the service effective?

Our findings

We found staff continued to have appropriate skills, knowledge, experience and support necessary for them to provide effective care to people using the service. Staff worked within the guidelines of the Mental Capacity Act 2005. This meant that the rating for this key area remains 'good'.

People told us that their care needs were met by the service. People had assessments of their care and support needs carried out prior to them using the service. We saw that they had personalised care plans that took into account their needs, choices, views and preferences. People told us they had been involved in planning their care and support and they regularly spoke with staff to review if these still met their needs. This included a person who said, "When my needs were assessed, they let me have a say. I am very happy that I still have very much control of my life, and that is really important to me."

People told us that staff were well trained. One person said, "Staff I have are very well mannered and well trained. Yes of course, there are some differences between them, but on the whole they are really good." We saw that staff had been appropriately trained to support people effectively. Staff we spoke with were complimentary about the quality of the training and support they received through regular supervision and appraisals. One member of staff said, "We get enough regular training. We do a lot of annual refreshers and we can ask to go on additional training if it is relevant to our work." In relation to the quality of supervision, one member of staff told us, "Supervisions and appraisals are fine. It is a two-way process because if we have any worries or concerns, we tell them."

Where required, staff supported some people with their meals. However, none of the people we spoke with were being supported with this. Staff told us that where this support was provided, it was done well and with the involvement of the person being supported. This was supported by information we saw in someone's care plan.

Staff worked closely with the housing provider to ensure that the design and decoration of people's homes did not hinder effective care, and adaptations were made if required to enhance people's independence. We saw evidence that appropriate equipment was ordered and installed if people required it. For example, one person told us, "After they assessed my needs, they asked me where I would like handrails." The person needed these to move safely in their home.

Where required, people were supported to receive on-going healthcare support because the service continued to work closely with various health professionals. People told us that they or their relatives managed their health appointments, and staff normally assisted them to access urgent care if they became unwell. One person told us, "If I don't feel well, someone will help me to ring the doctor or the hospital. It's very bad to be on your own when not feeling well."

The 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. We checked whether the service was working within the principles of the MCA and found these were met. Records showed that most people had capacity to make decisions about their care and support, and people we spoke with confirmed this.

Is the service caring?

Our findings

We found staff continued to treat people with kindness, respect and compassion. People were still being supported to be actively involved in making decisions about their care, and their privacy, dignity and independence were respected and promoted. This meant that the rating for this key area remains 'good'.

People told us that staff were kind, caring and friendly towards them. One person told us, "They're very nice people." Another person said, "They are very considerate."

People told us they got on well with staff and had formed some really warm and caring relationships with them. One person told us, "I do like all carers, but I must admit I have my favourites. It's natural that you develop a good relationships with people who are with you longest. It doesn't mean others are bad, not at all." Staff spoke fondly about people they supported, and they told us that they had developed close and positive relationships with everyone. One member of staff told us, "We have enough time to get to know people here and we tend to see them a few times during our shifts."

People told us they were always supported to make decisions and choices about their care and support. They further told us that this was respected by staff who always took into account people's individuality and preferences. One person said, "There was no question if I would be happy to have a male carer, I know they will not send one." Another person said, "They know I have a preference for some carers and they are happy to send those carers to me."

People told us that staff supported them in a respectful manner, and they promoted their privacy and dignity, particularly when providing personal care. One person said, "They knock on the door even if they have keys, and wait till I am there to open it." People also said that staff encouraged them to maintain their independence as much as possible, and would only provide support when it was necessary. People we spoke with told us that they were still able to do a lot for themselves, such as shopping and preparing their own meals, and cleaning their own homes. One person said, "My flat is not very tidy, but I like it that way."

Is the service responsive?

Our findings

People were still being supported to receive person-centred care that was responsive to their individual needs. People's concerns and complaints were managed effectively and improvements made. People were supported well at the end of their lives. This meant that the rating for this key area remains 'good'.

People were supported in a person-centred way to ensure that their individual needs were met. Staff worked closely with people to regularly review care plans to ensure that these continued to meet people's assessed needs. Records of regular consultations with people showed that they were happy with how staff supported them. People told us that staff were responsive to their needs and always supported them at their agreed times. One person said, "I think my care is perfect for me, I don't want to change anything. I know I can and I would if I think this will help me more. At this moment, I am quite content." Another person said, "I don't want anything more, but I know I can ask the manager. I'm really happy with the way things are." In addition to people's planned care periods, they could also use their personal alarm to alert staff if they needed support. People we spoke with told us that staff responded to their activated alarms very quickly and they always provided the support they required.

People's concerns and complaints were handled effectively. People told us they were happy with their care and they had no reason to complain. One person said, "I don't have any reason to complain but if I do, I would just speak to the warden or carers." The service had not received many complaints since our last inspection in November 2015. Records we saw showed that the registered manager had taken appropriate action to deal with any complaints or concerns raised by people using the service.

Where possible, people remained in their own homes at the end of their lives as long as they did not require specialist care that could only be provided elsewhere, such as a hospital or a care home. Staff told us of some people they had supported at the end of their lives and how they ensured that people remained comfortable, dignified and pain-free.

Is the service well-led?

Our findings

We found the service was still well-led, and had robust quality monitoring systems in place to ensure that they continued to provide good quality care to people using the service. There had been further improvements in the quality of the leadership within the service. The provider's vision and values were creative and placed people at the centre of everything they did. There was a strong organisational commitment and effective action towards ensuring that there was equality and inclusion for people using the service and staff. This meant that the rating for this key area remains 'Good'.

People and staff described the service as being exceptionally well-led. One person told us, "They're all really good and I'm happy. I can talk to the manager if I need anything." There was an experienced and skilled registered manager in post who provided stable and consistent management and leadership. The registered manager worked closely with the provider's other senior staff and the team leader to continually develop the service, and provide the highest standards of care possible. As a result of the registered manager's high commitment to providing good care to people using the service, people told us they received very good care. We also saw various compliments from relatives of people using the service and these showed they were happy with how their relatives were supported by the service.

The registered manager had a clear set of values and vision for the service. These were evidenced in their translation of the provider's 'People Plan 2016-2019' into their local 'Extra Care Home Care Team Plan' so that it was more relevant to people using the service and staff. We saw these documents and noted that the provider's values were: Integrity; Improvement; Customer-focused; Accountability to local people; Respect others; Embrace equality and diversity, cohesion, and inclusion. The provider was clear about how they would achieve this. For example, we found equality, diversity and human rights principles were embedded in the provider's ethos. Documents such as the 'Customer Charter' reflected the provider's aims to adhere to these principles. There were also policies on equality in employment to ensure that no discriminatory practices were used when recruiting staff, developing and promoting. Everyone we spoke with said their individuality was always respected.

Abigail Court (Domiciliary Care) is one of three extra care services run by the provider, and managed by the registered manager. These services had all been rated 'good' when they were first rated, and we found them to be still good when we returned to check if they were still meeting the fundamental standards. Additionally, three other services run by the provider have current ratings of 'good'. This showed that the provider had put effective systems in place to drive continuous improvements and subsequently, ensure that people received consistently safe, effective, compassionate and good quality care.

The provider and the registered manager promoted a positive culture within the service which led to a person-centred approach, openness, and inclusive working with people using the service and their relatives. This was evidenced in the provider's 'Service User Guide' and 'Statement of Purpose', which were given to everyone they supported. The registered manager described an open, transparent and fair culture, with strong community links. They also told us that they were a learning service, with ambitions to strive to be the best they could be. This was because the registered manager worked closely with the provider's other

managers through 'partnership meetings' for the provider's reablement services, older people day service, and extra care services. The registered manager told us that during these meetings, they shared good practice including learning from incidents, so that they could use this to continually improve. The registered manager engaged in other local provider forums to ensure that they continually kept up to date with current best practice guidance.

Provision of social activities was not part of the commissioned support for people using the service. However, the registered manager told us how they supported people to develop social links so that they did not become socially isolated. They said, "We hold coffee afternoons every Thursday and customers have an opportunity to come together to socialise and have a friendly chat." They also told us that they used these gatherings as a tool to celebrate nationally or internationally recognised days. For example, on 4 October 2017 they held an 'International Day of Older Persons' celebration with a theme of 'Stepping into the Future: Tapping the Talents and Participation of Older Persons.' Also, they had a 'Dignity in Care Day' in early February 2018 where they discussed various issues including advising people regarding staying safe at home and in the community.

Collaborative working was at the centre of service development. People had opportunities to provide feedback about their care during their monthly keyworker engagement meetings, six-monthly service user consultations and annual surveys. The registered manager told us that gathering regular feedback from the people was an integral part of their continued dedication to delivering an increase in the quality of life for people they supported. There was evidence that they welcomed feedback from and acted upon this. A report of a survey completed in October 2017 showed that 12 of the 14 people who responded were happy with the quality of care they received. The registered manager had put an action plan in place to deal with the issues raised by the other two people, including discussing with staff during team meetings. This ensured that staff could further develop their practice.

Staff felt valued and enabled to contribute to the development of the service through monthly team meetings. Minutes of these meetings showed that various issues relevant to staff's roles were discussed. In addition to the provider's annual staff survey, the registered manager had also introduced a local survey. The results of these showed that staff provided positive feedback. We saw that staff development was central to the provider's plans to be an effective organisation. It was evident that the provider's training was effective in enabling staff to provide consistently good quality care to people using the service. This was confirmed by staff we spoke with.

The registered manager told us that staff were encouraged to explore career pathways within the organisation, and that managers were committed to developing a skilled and motivated workforce. They also said that the service recognised that many staff wanted to develop their career or change careers, and they would support that in order to retain valuable staff. They further told us, "All staff have opportunities to develop their roles through training, delivering of some training, and working across the provider's services to share best practice." The registered manager told us that the provider was keen to motivate staff by recognising and celebrating their achievements and commitment to the provider's vision and values. We saw that one member of the staff was shortlisted as the provider's 'Employee of the Year 2017'. They and the registered manager were proud to share this information with us. The member of staff was grateful to have been nominated, although they did not win the overall prize. We saw that the service had longstanding staff, with a number of them having worked for the provider's various services for over 10 years. One member of staff who had worked for the provider for more than 20 years said, "I wouldn't be here this long if I wasn't happy. I enjoy my work and I think we provide really good care to customers. I'm proud of what we do."

Quality monitoring checks were a vital part of the registered manager's approach to continually drive the standards of care at the service. The consistency, thoroughness and frequency of checks and audits of the quality of the service ensured people received very good care. Care planning and reviews, record keeping and medicines management were audited regularly. There was a service improvement plan where areas requiring improvement were acted on. The registered manager and provider were highly responsive to issues requiring improvement, and it was evident throughout this report that they always took prompt action to rectify shortfalls. This demonstrated a proactive management team that was focussed on always improving the welfare of people using the service.