

Just a Little Company (Care and Support at Home) Ltd

Just a Little Company

Inspection report

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Ratings

Overall rating for this service

Good 

Is the service safe?

Good 

Is the service effective?

Requires Improvement 

Is the service caring?

Good 

Is the service responsive?

Good 

Is the service well-led?

Good 

Summary of findings

Overall summary

Just a little company provides a care and support service to people who live in their own homes in and around Chesterfield. This is the first inspection of this service since they registered with us in April 2016 and 13 people were receiving a service. The organisation provides other support that is not regulated by us which includes personal shopping, domestic services and support in the community.

The service had two registered manager in place at the time of our inspection. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons.' Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.

People were confident that the staff were knowledgeable about the different types of abuse and knew how to report any incidents or concerns to help to keep them safe. Risks to people's safety had been assessed and staff knew how to support people to reduce any risk of harm. People were able to retain their independence and staff supported them to feel safe in their home and receive their medicines as prescribed. People felt there were enough staff and they had a small team of staff who provided all their care and support. Recruitment procedures meant that any new staff completed checks to ensure they were suitable to work with people.

People liked the staff who provided their support and felt their dignity was promoted and privacy respected. Concerns and complaints were responded to and people were encouraged to raise any issues.

People were involved in the planning and review of their care and support and family members continued to play an important role. Staff gained information about what was important to people so that they could provide care which met their preferences and people felt the staff were skilled and knew how to provide their care.

People could comment on the quality of the service and felt their views were listened to. People and staff were positive about the leadership and management in place and felt they received guidance and support. Systems were in place to assess and monitor the quality of the service. People and staff were encouraged to raise any views about the service, to review how improvements could be made. The manager promoted an open culture which put people at the heart of the service.

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 were kept safe by staff who knew how to safeguard people and protect them from harm. Staff understood how to recognise potential abuse and were confident reporting any concerns. Risks associated with people's care were assessed and staff knew how to support people and they received their medicines as prescribed. There were enough staff to meet people's needs and the provider had recruitment processes to check the staff's suitability to work with people.

Is the service effective?

Requires Improvement ●

The service was not always effective.

Staff did not receive an induction into the service to ensure they were able to provide the support people needed. Informal training was provided and identified through supervision. People were able to decide how they wanted to be supported and made their own decisions. People were able to make choices about the food they ate and were supported to maintain their health and wellbeing.

Is the service caring?

Good ●

The service was caring.

Staff supported people in a kind and caring way and people had developed positive relationships with them. Staff knew people well and treated them in a dignified and respectful manner.

Is the service responsive?

Good ●

The service was responsive.

People were involved with the assessment and planning of their care, and the provider was responsive to people's changing needs. People shared their experiences and people were confident to report any concerns.

Is the service well-led?

Good ●

The service was well-led.

The provider had effective systems in place that identified areas where improvements were required. There were quality checks in place to drive improvement and a positive culture was promoted. The staff felt supported and valued in their roles and had their views listened to.

Just a Little Company

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.

We inspected the service on 24 July 2017. The provider was given seven days' notice because the location provides a domiciliary care service and we wanted to make sure people and staff were available to speak with us.

We used a range of different methods to help us understand people's experience. We made telephone calls to three people, one relative, spoke with two staff and the registered managers. We also received written comments from people and relatives, consulted with a referral and signposting service and commissioners of the service. We used this information to make a judgement about the service.

On this occasion we did not ask the provider to send us a provider information return (PIR). This 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. However, we offered the provider the opportunity to share information they felt relevant with us.

We looked at three people's care records to see if these were accurate and up to date. We also looked at records relating to the management of the service including quality checks.

Is the service safe?

Our findings

People felt there was enough staff to provide safe and effective care. People had a small group of regular carers who provided all their care and who they knew well. One person told us, "I know all the staff. It was difficult accepting support when they first came here but now I look forward to seeing them and they have become friends to me." Another person told us, "They don't let you down. I'm confident they know what they are doing and I'm really happy with all of them." Staff felt the manager had systems in place to ensure they provided the agreed care at the expected time. One member of staff told us, "When we arrive at our first call, we text the member of staff who is 'the dedicated point of contact' to let them know we have arrived and we do this at the end of the day too. There have been a couple of times when I've forgotten and that person has rang to make sure I'm alright. It's nice to know they are thinking about our safety too."

People felt safe and comfortable with the staff and were confident that they knew how to protect them from harm. One relative wrote, 'It is more like we work together as one big team to keep [Person who used the service] safe and happy as possible.' Staff had a good understanding and knowledge of safeguarding people and knew how they may recognise possible abuse or neglect. Safeguarding was discussed during staff supervisions and they explored what safeguarding meant to them and how they could keep people safe. The staff understood their responsibilities to report any concerns and we saw where they suspected harm, this had been reported to the registered manager and advice was sought from the local safeguarding team.

Staff knew the risks associated with people's care and support as they knew people well. People were able to speak with the staff about how they wanted to be supported. Where people used equipment, an assessment was carried out to ensure equipment was used correctly and was suitable for people. One person told us, "I get around very well. I'm sure if this changed the staff would change with me and provide me with all the support I needed." An environmental risk assessment was completed for hazards in the home and whether staff were able to use any of the facilities.

People were generally responsible for their own medicines. Where people needed support to take their medicines they were confident they received these as required. One person told us, "I can't manage as well as I used to so the staff put the creams on for me." Another person told us, "I have all my tablets from the chemist and don't need any help from the staff." Where staff supported people with any medicine, they had received training to ensure they knew how to do this safely. The registered manager agreed that where people needed support a detailed record of all medicines would be recorded.

When new staff started working in the service, recruitment checks were carried out to ensure they were suitable to work with people. One person wrote to tell us, 'The manager is very particular about who they employ and has even asked me to sit in on interviews which made me feel more in control of my own life.' We saw that staff's suitability for the role was ensured by obtaining references, having a police check and confirming the validity of their qualifications, previous experience and training. The registered manager agreed that where verbal references were sought this would be recorded and assessments of risks were completed for accepting recent DBS checks from previous employers.

Is the service effective?

Our findings

New staff did not receive an induction into the service. When new staff started working in the service they worked with other experienced staff and had an opportunity to get to know people. The provider asked for evidence of training from their previous employer but staff competence was not always assessed before they started working to ensure staff were suitable to work with people. People, however, were confident that staff knew how to support them and received care from a small team of staff they knew well. One person wrote to tell us, 'The team is very small and I have two main support workers, which means I know who will be coming each day and they understand my needs so I don't have to keep training up staff to support me the way I choose to be supported. My partner can now go to work, knowing that I will be treated with the care and compassion they would expect, so it has made a big difference to their life too.' A relative wrote, 'Just a little company are not only reliable and knowledgeable, but they take care to a higher level.' The registered manager agreed that staff would benefit from a formal induction. They had developed a programme of training to enable staff to complete the care certificate and told us this would now be implemented. The care certificate sets out common induction standards for social care staff. It has been introduced to help new care workers develop and demonstrate key skills, knowledge, values and behaviours which should enable them to provide people with safe, effective, compassionate and high quality care.

The staff received informal training through discussion within supervision. Staff were asked whether they needed more support and the registered manager checked their understanding of safeguarding, when alerts should be made and identified where further training was needed. Staff were encouraged to reflect on their practices and how they supported people. Staff told us this included observational supervision as well as one to one meetings. One member of staff told us, "The senior staff come out and watch what we do and make sure we are doing things right." The registered manager told us, "We are a small group of staff and work together and talk to each other most days. If there are any problems we can raise this at any time."

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 make 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.

On this inspection we checked whether the provider was working within the principles of the MCA. The staff told us that people who used the service had capacity to make decisions about their care and support. People told us they felt they were helped to make decisions and be in control of their care and had consented to their support plan. One relative told us, "The care plan was written based on what they said they wanted. It was all based on our expectations on what the care should be like." The provider understood their responsibility to ensure they had accurate information about any legal agreement to make decisions on others behalf. Staff understood that where people were no longer able to make decisions for themselves, other people could help make this decision in their best interests.

People retained their independence for managing their health care and staff knew about people's health needs and how this affected their support. Where changes were identified, the staff raised this concern with health professionals. One relative told us, "The staff will take notice of everything and if they are worried they will let us know or help by calling the doctor for them. This has been really helpful on more than one occasion to make sure they got the help they needed." Another relative told us, "The staff aren't nurses and don't do nursing task but they do take notice of how they are and check their skin to make sure they haven't developed a pressure sore. If they are worried they report this."

People had choice and flexibility about the meals they ate and were responsible for providing their food for staff to prepare. People chose what they wanted to eat and staff helped to prepare this. We saw people had commented on how they wanted their food to be prepared and worked with staff to ensure it suited their individual preferences.

Is the service caring?

Our findings

People were supported by staff who were kind and caring, knew their likes and dislikes and got to know them as a person. One person told us, "The service provided is of a high quality, we see the same carers on a regular basis with very little change. They all know me really well now and know what they are doing. I feel very fortunate." Another person told us, "They are all so wonderful and I couldn't manage without them. They think of everything and are really caring. We can still have fun and I think of them as my extended family." One member of staff told us, "It's a lovely company to work for and we are encouraged to spend time and talk with people. People receive all the care they should have. If they don't need any personal care then we sit with them and talk about what's happening. This makes all the difference to people."

People's privacy and dignity was respected. Where personal care was delivered, people told us the staff took time to ensure they were covered. One person told us, "My dignity is important to me and it's never been compromised. The staff are always courteous and make sure I don't feel exposed. It helps because I now know the staff really well and I feel more comfortable with them. I wouldn't like it, if lots of different people came here and did it. This suits me."

People were happy with the staff that supported them and told us they treated them with respect and listened to what they had to say. One relative told us, "The staff are very good at what they do and we can communicate easily with them. We can say what we are thinking and they listen."

Family members could continue to play an important role in people's care. One relative wrote, 'Their communication is impeccable. We are always consulted or informed more or less immediately about anything relevant. We feel very much involved in their care.'

People were encouraged and supported to be as independent as they wanted to be. One person told us, "My independence is important to me. The staff don't step over the mark and don't do too much or take over. They are very respectful and understand what I want and how I need to carry on. I'm not ready to stop."

People were involved with their support and given choices about their care. One person told us, "The care is excellent. They go a little bit further than other companies and this makes all the difference." One relative told, "[Person who used the service] is very particular about the care they receive. They have worked with them to get to know what it is they really want. The staff have learnt how they want their support and they are very happy with that."

Information about people was kept securely in the office. The registered manager ensured that confidential paperwork was regularly collected from people's homes and stored securely at the registered office. Staff understood their responsibility to maintain people's confidentiality; staff had access to people's details through their phone. The information was password protected and staff understood the need to keep this information confidential.

Is the service responsive?

Our findings

People received support at the time they wanted and staff arrived when expected. Visits were planned to enable staff time to travel to each person. Each person received a rota which recorded which member of their staff team were working and what time they were expected. One person told us, "They may be a few minutes late but never any later. They have my phone number so they can call if there is a problem. They know I'd understand."

People's care and support was planned to meet their needs and they contributed to the development of their plan. People told us that they were able to help write their plan and discuss this with staff. An assessment was carried out before starting to care for people and where possible the registered manager would support the member of staff on the first visit and introduce new staff to the person. Care was taken to review who was the most suitable member of staff to support each person and consideration was given about care that was to be provided and personality. After their first visit, people were asked whether they were happy with the support they received. Staff were also encouraged to reflect on how the visit was conducted. One member of staff told us, "It's important that we get on. Sometimes it's just about different personalities. We want to make each visit right and sometimes that means being honest with yourself and letting someone else provide the care who gets on better with that person."

Where people's needs changed the staff arranged for the support plan to be reviewed. Care reviews were carried out with the registered manager who sought people's views on the service they received and whether their support had changed. Where people wanted a change to the time of their visit, they could request this and changes were made where possible. One relative told us, "The manager will come and see us and ask us how everything is and if we need anything changing. They just want to get everything right." One registered manager said, "If it's in the best interests of people why wouldn't we make the changes? Things evolve and change. We don't have everything written in stone. If people want to change their care and for us to do something different, then they can. We are very clear if people have an hour for staff to provide care then they receive an hour and we can support them flexibly."

People were confident their concerns would be responded to and knew how to raise any concerns and make complaints if needed. One relative told us, "If we had any worries we would just ring. They are very responsive. There was one member of staff who we wanted to change. There was nothing wrong, it was just we wanted someone who could do a particular task. We told the manager and other staff visit now. There were no problems or issues with this, it was just reorganised and we were happy with this." We saw staff raised concerns on behalf of people where they had identified any concern. The registered manager told us, "We pride ourselves on being responsive and giving a quality service. People here receive excellent care from a very small team of staff. We want to know if anything needs improving so we can make sure people are happy." We saw where any complaint had been raised, these had been investigated and people informed of the outcome. The provider also kept a copy of all complaints and compliments received.

People were supported to pursue activities and interests that were important to them or were helped with their shopping and cleaning. The provider arranged services for people to be supported with their interests

or to support people when out; for example when shopping. During these support visits, personal care was not provided and therefore this support is not regulated by us.

Is the service well-led?

Our findings

People who used the service knew who the registered managers were and felt the service was well led. One person wrote to tell us, 'The manager is passionate about people getting a first class service. They understand what person centred care means and I feel this is heartfelt and not used as a selling point for their company. They are always at the end of the phone and they keep staff and people updated on a regular basis so any problems can be easily resolved.' We received feedback from one organisation that said, 'We have had feedback from several clients who have stated the service is good value for money and staff are always prompt and professional. The staff go the extra mile in order to ensure a holistic person centred approach is delivered at the core of all client engagement.'

The service had been in operation for twelve months and the provider sought people's views on the quality of service provision after their first week, first month and at three monthly intervals. We saw feedback was positive and if people raised any concerns this was addressed straight away with the person. People told us they were able to share their views and the provider took action to improve their experience of the service. We saw people had recorded, 'Enjoying the personal care.' 'Enjoy the company.' And 'Everyone has been very professional.' The registered manager told us they were proud of the work from all the staff and valued people's decisions. They told us, "Most of our referrals come from word of mouth and we are proud of that. Our values are based on being open, honest and caring. Our values are simple and based on the core principle of giving a service that we would like to receive for a family member."

Staff enjoyed working in the service and one member of staff told us, "We do the best we can. We want to get it right. We are different because we are committed to getting it right and we have high expectations." Another member of staff told us, "I think it's such a great company to work for. The support is great and if you ever have a problem, they respond straight away."

Staff were encouraged to contribute to the development of the service through supervision or through observation visits. For example, staff were asked about how people were supported, whether they felt people need to have their care reviewed. For example, they looked whether the call met people's needs, whether this needed changing to accommodate personal or social needs. One member of staff had identified that one person would benefit from having their time changed to enable them to have personal care from the member of staff they preferred and this was arranged.

The registered managers also communicated with staff by email. One registered manager told us, "It's the culture of the service we are trying to develop. It's important that staff feel valued and respected. It's important how they feel about themselves and for them to know they are caring and compassionate people. That's what is reinforced in the fortnightly emails and we share positive testimonials to let them know how valued they are."

Quality checks monitored the service people received. Records were audited when they were received into the office to make sure people received their medicines as prescribed and care was delivered as outlined in their support plans. One external agency reported, 'Our own interactions with the organisation have always

resulted in good outcomes for our clients and the staff deal with referrals in a timely and appropriate manner.'

The provider and staff were proud of the service they provided and told us they enjoyed working in the service.