

ADL Plc

Jubilee House

Inspection report

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Ratings

Overall rating for this service	Good ●
Is the service safe?	Good ●
Is the service effective?	Good ●
Is the service caring?	Good ●
Is the service responsive?	Good ●
Is the service well-led?	Good ●

Summary of findings

Overall summary

The inspection visit took place on 10 August 2017 and was unannounced. The previous comprehensive inspection was carried out on 17 March 2015. At that time the service was meeting the requirements of regulations.

At the previous inspection we found the registered manager and staff were not trained in the Mental Capacity Act 2005 and Deprivation of Liberty Safeguards. They did not understand its potential impact on their practice. This had been recognised by the registered manager who was seeking the necessary training. Since that inspection action had been taken to ensure all staff had undertaken training and understood what restrictive practice meant and what action to take. The current manager understood the requirements of the Mental Capacity Act 2005 (MCA) and the Deprivation of Liberty Safeguards (DoLS). This meant they were working within the law to support people who may lack capacity to make their own decisions. People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible; the policies and systems in the service supported this practice.

Jubilee House provides residential care for up to 28 older people some of whom were living with dementia. The service is also registered to provide nursing care, however nursing care was not being provided and the manager said it was not the intention of the service to admit people who required nursing care. The manager told us the provider is continuing to review whether a nursing category is to be retained for this service. At the time of the inspection there were 26 people living at the service.

The service is situated within a residential area of Torquay, close to the town centre and transport network. Car parking is available at the front of the service on a private forecourt. There are two floors serviced by a passenger lift. There were a range of aids and adaptations suitable to support the needs of people using the service. There was an external garden area suitable for people to use.

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

People and relatives all spoke positively about the service. Relatives told us that people were safe living at the service and that staff were kind, friendly and treated people well. They told us that the manager was always available and approachable. Comments included, "Can't praise the staff enough," "They (staff) are very good at sorting things out for me when I get a little muddled" and "The support and care from the team is excellent."

Safeguarding procedures were in place and staff had a good understanding of how to identify and act on any allegations of abuse. Accidents and Incidents were logged, investigated and action taken to keep

people safe. Risk assessments were in place which were individualised for the person. This was to minimise potential risk of harm to people during the delivery of their care and support. Risk assessments were regularly updated and changes made as necessary so staff were responding to current risk levels.

The service had clear pictorial signage to meet the needs of people living with dementia. This helped people to recognise their rooms and orientate themselves around the building. The service was well maintained and clean. There were no incontinence odours at the service. People's bedrooms were well decorated and personalised to give them a familiar feel. One person told us they loved the fact they had personal items around them including specific items of furniture and ornaments.

The way medicines were managed was safe. Staff responsible for the administration of medicines had received training to ensure they had the competency and skills required. Medicines were safely kept with safe arrangements for storage.

Staff were supported by a system of induction training, supervision and appraisals. Staff felt well supported by the manager who saw all staff regularly for a one to one meeting. Staff received training relevant for their role and there were good opportunities for on-going training and support and development. The training needs of all staff were well monitored by the manager and updates were provided in a timely manner.

The service had identified the minimum numbers of staff required to meet people's needs and these were being met. Recruitment procedures were safe to help ensure staff were of suitable character to work with vulnerable people.

People and relatives spoke positively about the meals provided by the service. There was sufficient choice and people received appropriate support where required. We observed regular snacks and drinks throughout the day were provided between meals to make sure people received adequate nutrition and hydration. Comments from people who lived at the service were all positive about the quality of meals provided. One person said, "I have a good appetite and I like the range and quality of the meals here. Very good."

People had good access to healthcare professionals and their healthcare needs were being met. A medical emergency was responded to effectively during the inspection and demonstrated staff knew what action to take.

Care plans were well organised and contained accurate and up to date information. People appeared to be well cared for. Care planning was reviewed regularly and people's changing needs recorded.

People had access to a programme of varied activities. A new activity co-ordinator was reviewing current activities and making arrangements for events for people. These included singing, crafts and visits to the local area. Not all people wanted to take part in activities. Three people told us they liked to sit and have a chat, or read. Staff respected people's choices.

People who used the service and their relatives knew how to raise a concern or to make a complaint. The complaints procedure was available and people said they were encouraged to raise concerns or make comments.

There was an effective quality assurance process in place to drive improvement in Jubilee House. These included regular audits of the service, annual surveys, resident meetings and staff meetings to seek the views of people about the quality of care at 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 remains good.

Is the service effective?

Good ●

The service was effective. Management and staff had received training and had an understanding of the Mental Capacity Act 2005 and made sure people who did not have the mental capacity to make decisions for themselves had their legal rights protected.

Staff were well trained and supported with regular supervision and appraisals.

People had access to a varied and nutritious diet. Staff were available to support people with their meals are required.

Is the service caring?

Good ●

The service remains caring.

Is the service responsive?

Good ●

The service remains good.

Is the service well-led?

Good ●

The service remains good.

Jubilee House

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 visit took place on 10 August 2017 and was unannounced. The inspection was undertaken by one adult social care inspector.

Before our inspection visit we reviewed the information we held on Jubilee House. This included notifications we had received from the provider, about incidents that affect the health, safety and welfare of people who lived at the service. We also reviewed the Provider Information Record (PIR) we received prior to our inspection. 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. This provided us with information and numerical data about the operation of the service

We spoke with a range of people about the service; this included six people who lived at Jubilee House, three relatives, six staff members and the manager. We also spoke with one health professional visiting the service. We spoke with other people but due to their communication needs they were unable to provide us with detailed information about their care. We used the Short Observational Framework for Inspection (SOFI). SOFI is a way of observing care to help us understand the experience of people who could not talk with us.

We looked at the care records of three people who lived at the service, training and recruitment records of three staff members. We also looked at records relating to the management of the service. In addition we checked the building to ensure it was clean, hygienic and a safe place for people to live.

Is the service safe?

Our findings

People told us they felt safe and supported by staff. Their comments included, "I feel very safe living here. The staff are wonderful and give me all the help I need" and "Staff are always around when I need them." Relatives told us they had 'every confidence' in the way their relative was cared for. They said, "I need to let you know I am more than happy with the wonderful level of care they give (Person's name). It gives me total piece of mind" and "Whenever we visit we see staff are always around. You don't have to wait long if you need some help".

Staff said they felt confident that people were always treated well and that they did everything to ensure their safety and wellbeing. A staff member said, "We (staff) think an awful lot about the residents. We make sure they are safe and well looked after." Staff had received training in safeguarding vulnerable adults and were able to describe to us how they would identify and act on any concerns. The procedures that were in place to minimise the potential risk of abuse or unsafe care were known to staff who had been trained and updated about how to respond to concerns.

Accidents and incidents that took place in the service were recorded by staff in people's records. Such events were audited by the manager. This meant that any patterns or trends would be recognised, addressed and the risk of re-occurrence was reduced. During the inspection an emergency occurred and staff were observed to respond immediately and seek medical attention so that the person was safe and received the necessary treatment and care. The person's family were immediately informed and visited. They told us the manager and staff always informed them if any event occurred which affected their relative.

People had assessments in place which identified risks in relation to their health, independence and wellbeing. There were assessments in place which considered the individual risks to people such as emotional and behavioural, nutrition and hydration, skin, mobility and personal care. Where a risk had been identified, for example a falls risk, the assessment had looked at factors such as their medicine, design of their room and whether current mobility aids were suitable. The person was resistive to support as they wanted to be independent. Staff recognised this and this was reflected in the care plan for this person. This supported staff to identify and act to protect people from any specific area of risk. Staff were aware of the need to discreetly observe the person when moving around for their safety.

The service had identified the minimum numbers of staff required to meet people's needs and these were being met. Recruitment systems were robust and new employees underwent the relevant pre-employment checks before starting work. This included Disclosure and Barring System (DBS) checks and the provision of satisfactory references. There were sufficient numbers of staff deployed throughout the service to ensure safe and timely care. Call bells were answered promptly. A person told us, "I never have to wait long for somebody to come and help me." A staff member said, "Residents are kept safe because we have a really strong team it really works well." We observed care and support and saw staff were visible and attentive throughout the day. Staff were available to quickly intervene if people became distressed, or needed any kind of support or reassurance.

We checked a sample of the medicine administration records (MAR) and it was clear that people received their medicines as prescribed. Medicines had been checked on receipt into the service, administered as prescribed and stored and disposed of correctly. The medicine administration records for three people had been accurately recorded as seen following the morning administration round. This meant people had received their medicine as prescribed and at the right time. The registered manager had audits in place to monitor medicines procedures. Some people had been prescribed creams and these had been dated upon opening. This meant staff were aware of the expiration of the item when the cream would no longer be safe to use.

The service held medicines that required stricter controls by law. We checked the stock held against the records and they were correct. Regular audits of all aspects of medicines management were carried out to check medicines were managed safely.

The building was clean and free from offensive odours. We asked people if they thought the service was kept clean, all said 'Yes'. One person went on to say, "They (staff) take pride in keeping this place spick and span."

There was documentation to record maintenance and service of equipment as required. For example records confirmed gas appliances, fire systems and electrical equipment complied with statutory requirements and were safe for use.

Is the service effective?

Our findings

At the previous inspection it was found that management and staff had not undertaken training in Mental Capacity Act (2005) which had the potential for staff not to recognise where restrictive practice might occur and how people's rights would be protected. The service took action to address this. All levels of staff had undertaken training so they understood what restrictive practice meant and what action to take.

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. The application procedures for this in care homes and hospitals are called the Deprivation of Liberty Safeguards (DoLS)."

The manager and staff demonstrated an understanding of the legislation as laid down by the MCA and the associated DoLS. Discussion with the manager confirmed they understood when an application should be made and how to submit one. Assessments had taken place and applications submitted where restrictive practices were in place. Staff were very aware of enabling people to live with the least restriction. For example people had space to move around the service independently.

During the inspection we spoke with a visiting healthcare professional who told us they had 'Every confidence' in the staff team. They told us staff always alerted them to any concerns they may have about people and that staff were competent in their roles and followed any guidance they might provide. One commented, "They (staff) are very keen to learn and always take on any advice."

Staff said that they felt supported with their training and development needs and received the training they needed to be able to provide the necessary support and care to people. They received regular support and supervision and attended regular meetings. One staff member told us, "I have been very supported by the manager. It's given me a lot of confidence in what I do." Staff had regular access to the manager or senior staff if they needed additional support in a less formal way. A staff member said, "I know the support is there if I am not sure about anything. I know I will get the support I need."

We observed staff worked professionally and effectively in their roles. They followed care plans, administered medications safely and interacted with people in a positive, professional and friendly manner.

Where necessary new staff without previous care experience completed the care certificate. The care certificate is a training scheme for staff in social care which it is recommended for all staff new to the care role.

Throughout the morning period people were getting up and moving into various lounges and the dining area within the service. There were no restrictions as to timescales for breakfast. People were observed having breakfast when it suited them. For example two people had chosen to 'lie in' until later in the morning. Staff told us they supported people to eat when they wanted to. One staff member said, "Everybody has their own routine and some like to eat early which is fine but some like to eat later. It's not a problem. During the morning the chef spoke with everyone individually about what they would like for lunch. There were a number of choices. It also gave people the opportunity to talk about any issues. For example one person said they wanted a smaller portion that day as they had their breakfast later than usual. This showed staff listened and acted on people's choices in respect of meals and mealtimes.

We observed lunchtime meals being served. It was a relaxed approach with most people being served lunch in a bright and well-designed dining area. People were engaging with each other throughout the meal and some stayed on to chat with a drink afterwards. Some people chose to eat meals in their own rooms. This was acknowledged by staff. Snacks and drinks were always available to people outside of mealtimes.

People had access to a range of healthcare professionals including GP's, opticians and chiropodists. Staff had access to specialist professionals to ensure people's specific needs were being met and to provide them with advice and guidance. This meant staff were able to deliver effective care and support. Care records contained details of any multi-disciplinary notes. District nurses who visited documented when they had seen a person and when they would return. People's healthcare needs were carefully monitored and discussed with the person or family members as part of the care planning process. Care records recorded any health professional visits including General Practitioners (GP's). This meant people's health was being effectively managed.

The services environment was light and spacious with every effort made to personalise lounge and dining areas. There were table decorations and pictures around the lounge areas. People and their relatives had been encouraged and supported to personalise their rooms with personal items. There was room for wheelchairs and hoists to be used without causing restrictions or hazards to people. There was a garden area with seating available to use.

Is the service caring?

Our findings

People told us they felt they received good care living at Jubilee House. One person told us, "Nothing is too much trouble". Another person commented: "I am very happy living here. I have all my needs met by very caring staff". A visitor told us, "We visit a lot and the staff are very respectful." A relative said, "The staff are excellent. I know my (relative) is very well cared for." A visiting professional told us all staff were very caring and had peoples best interests at heart.

Throughout the day we observed staff engaged with people in a caring and sensitive way. For example, they spoke with people in soft tones and with a smile on their face. We observed staff using appropriate touch and humour when spending time with people. It was clear staff knew people well and what their interests were. This helped staff to engage with people and use an interest as a talking point. One staff member said, "It's important to have fun and get residents laughing. We have a laugh everyday." The observations we made confirmed people who lived at Jubilee House were supported in a compassionate and inclusive way.

Staff knocked on doors before entering people's bedrooms and spoke with the person whilst entering the room so they knew who was there. When supporting people with personal care we observed staff made sure the door was shut for privacy. Staff took their time when caring for people who required more support. Staff asked for consent and explained what they were going to do before doing it. They constantly asked the person if they were comfortable and alright. It confirmed people had built relationships with the staff and staff knew people well and supported them in a respectful and dignified way. People were at the centre of the service provision. People were offered choices and options and staff respected and supported people with their choices. People's dignity was protected and their rights to privacy were upheld.

Bedrooms were decorated and furnished to reflect people's personal tastes. Some people felt it important to have things around them which were reminiscent of their past, as it helped give their bedrooms a familiar feel.

Visitors came and went throughout the day without restrictions. They told us they visited regularly at different times and were always greeted by staff that were able to speak with them about their family member knowledgeably. One visitor said, "We are always made to feel welcome and come to see (Person's name) in their own room."

People and their families were involved in decisions about the running of the service as well as their care. Families told us they had been invited to attend meetings and they knew they could attend any care plan review meeting if they wished.

The manager sought the views and experiences of the people living at the service at residents meetings and through daily communication with people. However there had been no formal resident/family meetings for several months. The manager stated they were aware of the need to address this issue with a planned meeting to take place in the next few months. At the last meeting subjects such as activities, the menu the purchase of patio furniture was discussed.

Is the service responsive?

Our findings

People told us they felt their needs were being well met at Jubilee House. People told us, "I like my own routine and that is not a problem to the staff" and "When I've needed it they (staff) get the doctor for me." "Relatives comments included, "(Person's name) is very independent and that's why there can be more falls. But staff always keep me updated like they have done today" and "Everybody (staff) has time for the residents. Whenever I visit I see it."

The manager and staff had a clear understanding of people's individual needs and how best to meet people's immediate and on going needs. The service's assessment profile formed the foundations from which individual care planning documents were developed. The information relating to individual management of a person's care needs included a focus on risk and how it would be managed. For example, where a person's level of falls had become a high risk. The service had requested an occupational therapy assessment to improve mobility aids for the person with the aim to reduce the number of falls. This showed staff were observant and responsive in the best interests of the person. A staff member told us, "We (staff) are encouraged to take note of any changes and feed it back. We do this every day and included it in the resident's notes." We observed this was occurring on a daily basis.

Care plans were detailed and informative with clear guidance for staff on how to support people well. The files contained information on a range of aspects of people's support needs including mobility, moving and handling, nutrition and hydration and health. For example, it had been recorded that a person was not drinking as much as they should to stay hydrated. Staff were prompting the person throughout the day with a range of drinks. This demonstrated staff had the information they needed to respond to people's specific needs. The information was well organised and easy for staff to find.

People had their health monitored to help ensure staff would be quickly aware if there was any decline in people's health which might necessitate a change in how their care was delivered. People had their weight checked regularly. Staff liaised closely with people's GP's, and the district nursing team for any support and guidance as required.

People were supported to maintain contact with friends and family. Visitors were always made welcome and were able to visit at any time. Visitors told us they visited without prior arrangement at different times and days and their family member was always clean, tidy and well cared for. Staff spoke knowledgeably to them about their family member.

Staff were able to tell us about people's backgrounds and past lives. They spoke about people respectfully and fondly. The way staff worked together and shared information meant people received the care and support they needed when they needed it.

Handovers took place between shifts to help keep staff informed if people's needs changed. Staff kept daily records detailing the care and support provided each day and how people had spent their time. These were completed consistently at various points throughout the day and were detailed, providing a good overview

of people's health and emotional well-being. Staff told us the daily records were informative and gave them the guidance they needed to respond to people's needs. A staff member said, "Making sure everything is recorded is important, so staff following on have the information they need."

A new activity coordinator was in post but not on duty on the day of the inspection. People told us they thought there were enough activities available to them. They said, "I like to do my own thing so I choose not to take part but I see people enjoying playing games and doing exercises" and "I think there is enough to do. I like to join in sometimes." The service was continuing to look at ways of engaging more with the community. For example taking people who want to, go out to local venues and shops. People were encouraged to spend time in the lounge areas socialising with others. People had access to quiet areas and a well maintained courtyard area. Jubilee House was planning a summer fete involving the people, their families and staff.

People and families were provided with information on how to raise any concerns they may have. Details of the complaints procedure and contact details of who to contact were contained the service user pack provided when people arrived. People told us they had not had any reason to complain. The service had not received any complaints.

Is the service well-led?

Our findings

People told us they had confidence in the way the service was managed. One person said, "I have every confidence in this home and the way its run. I think we have everything we need and we can always make comments about whether we want anything changing" and "A lovely all round home. No concerns about the way its run at all." A health professional told us, "A good home to visit. Staff very supportive." Staff told us they felt Jubilee House was well run. They told us the manager was actively involved with the day to day running of the service and they found this supportive. We observed this during the day of the inspection with interactions with people who lived at the home. Staff told us the management team's leadership was good and they felt supported in their roles and responsibilities. Comments included, "A very strong staff team and good leadership" and "There have been a number of changes in the last year but it's all settled down now. I think the communication is good between the office and staff."

There were clear lines of accountability and responsibility. The manager was supported by an area manager who visited most days to provide any support and guidance.

The management team worked in partnership with other organisations to make sure they were following current practice, providing a quality service to people in their care. These included social services, district nurses and a range of healthcare professionals who were associated and familiar with the needs of people using the service.

Quality assurance systems were used to measure the effectiveness of the service. They included audits in areas such as care plans, medicines, accidents and incidents. Audit results fed into a monthly monitoring plan completed by the manager and monitored by the area manager. Management overview included analysis of information about the quality and safety of the service. This meant systems were thoroughly reviewed and any trends or patterns could be identified and acted upon.

There were systems in place to support all staff. Staff meetings took place These were an opportunity to keep staff informed of any operational changes or working practices. They also gave an opportunity for staff to voice their opinions or concerns regarding any changes.

A quality assurance survey had taken place. It included seeking the views of people using the service and relatives. There was a good return from people using the service and families. Results were positive and comments included, "Always warm and friendly welcome," "Very content and happy" and "We are never disappointed with the great level of care we see." People told us they were very satisfied with the level of service they received at Jubilee House. Comments included, "The care is excellent," "It's like a home from home to me. I have everything I need or want here" and "Very satisfied with this home."

The maintenance of the building was being kept under review. General decoration and upgrading of the service was reviewed as part of the business plan to focus on areas which required more immediate attention. Any defects were reported and addressed where required by individual contractors. A new bathroom was being fitted at the time of the inspection to improve the level of bathing services.

