

Leicester Jamaica Community Service Group

Leicester Jamaica Community Service Group – Caribbean Court

Inspection report

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Ratings

Overall rating for this service	Not sufficient evidence to rate	●
Is the service safe?	Not sufficient evidence to rate	●
Is the service effective?	Not sufficient evidence to rate	●
Is the service caring?	Not sufficient evidence to rate	●
Is the service responsive?	Not sufficient evidence to rate	●
Is the service well-led?	Not sufficient evidence to rate	●

Overall summary

This inspection took place on the 3 and 5 August 2015 and was announced.

Leicester Jamaica Community Service Group – Caribbean Court. At the time of the inspection the service was supporting two people within their own homes in the Leicester area.

The service operates between the hours of 08.30 to 09.30 and 17.00 to 18:00 seven days a week. The provider employs four members of care staff.

The service operates from an office based within the West Indian Senior Citizens Project, (WISCP) which provides services that include a day care facility and meals, which

Summary of findings

are not regulated by the Care Quality Commission (CQC). People who access the services of Leicester Jamaica Community Service Group – Caribbean Court have regular contact with the services provided by WISCP and view the service they receive as part of a wider package of support.

The service whilst being inspected has not been rated because at the time of the inspection a limited service to two people was being provided. We had insufficient information to determine the level of service people received. We could not be confident that the support people currently receive would be sustainable should the service expand to provide care for additional people and/or increase its hours of operation.

The service had 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 registered provider told us they were in the process of interviewing for the position of registered manager. The service was being managed by two acting managers. We were advised by the provider that the two acting managers would be submitting an application to the Care Quality Commission (CQC) to become registered.

At the last inspection of the 1 October 2013 we asked the provider to take action. We asked them to make improvements in the assessment and planning of people's needs, the supervision and appraisal of staff and systems to monitor the quality of the service and the maintenance of the building which the service operates from. We received an action plan from the provider which outlined the action they were going to take. We found the provider had taken the appropriate action.

A person who received a service told us they felt safe with the staff that provided their care. Staff were

knowledgeable about their role in keeping people safe and knew who to contact in the case of an emergency. Staff had received training in how to promote people's safety should they have concerns about their welfare, which included following the providers safeguarding policy and procedure.

People were supported by staff that had undergone the appropriate pre-employment checks to ensure they were suitable to work with people. A person who received a service and the relative of the second person told us that staff were reliable and arrived on time to provide the personal care that was needed, this showed there were sufficient staff to meet people's needs.

People who use the service are supported by staff who know them well. Positive and caring relationships have been developed and people using the service told us staff were reliable, polite and friendly.

Staff told us that the registered manager was approachable and they received regular supervision which enabled them to discuss their work. Staff had undertaken or were in the process of undertaken training which enabled them to provide the care and support people needed.

People using the service and their relative told us that staff respected their wishes when providing personal care and support.

People told us they had information about the service they received, which included a copy of their plan of care along with information as to how to make a complaint. People told us they were happy with the service and did not have any concerns.

People who use the service had the opportunity to comment on the service they received. They met with and spoke with the registered manager and staff when they attended other services provided which are not regulated by the CQC.

Summary of findings

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

The service was safe.

People were protected from abuse because staff had an understanding of what abuse was and their responsibilities to act on concerns.

Risks to people's health and wellbeing had been assessed and measures were in place to ensure staff supported people safely.

There were sufficient numbers of staff available to keep people safe who had the appropriate skills and knowledge. Safe recruitment procedures were followed to ensure staff were suitable to work with people who used the service.

People were prompted by staff to take their medication safely.

Not sufficient evidence to rate



Is the service effective?

The service was effective.

People were supported by staff who had the appropriate knowledge and skills to provide care and who understood the needs of people.

People's rights were supported with regards to the care they received.

People were supported and provided with meals as required.

Not sufficient evidence to rate



Is the service caring?

The service was caring.

People we spoke with were happy with the care and support they received.

People were involved in the development and reviewing of plans of care.

People were supported by staff who were who listened to them and respected choices.

Not sufficient evidence to rate



Is the service responsive?

The service was responsive.

People's needs were assessed prior to receiving a service. Staff knew how to support people and took account of people's individual preferences in the delivery of care.

People we spoke with told us they had no reason to complain but were confident that their concerns would be listened to and acted upon.

Not sufficient evidence to rate



Summary of findings

Is the service well-led?

The service was well-led

The registered manager was available to people who used the service and its staff.

A registered manager was in post.

The provider did not have a formal system to assess the quality of the service. They were aware that improvements to quality audit systems would need to be should the service increase in size.

Not sufficient evidence to rate



Leicester Jamaica Community Service Group – Caribbean Court

Detailed findings

Background to this inspection

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

This inspection took place on the 3 and 5 August 2015 and was announced.

The provider was given 48 hours' notice because the location provides a domiciliary care service.

The inspection was carried out by one inspector.

We reviewed the information that the provider had sent to us which included notifications of significant events that affect the health and safety of people who used the service.

We spoke with one person who used the service and a relative of another. We spoke with the registered manager and three care staff. We looked at the records of the two people who used the service, which included their plans of care, risk assessments and records about the care they received. We also looked at the recruitment files of four staff, a range of policies and procedures, maintenance records of the building, quality assurance audits and the minutes of staff meetings.

Is the service safe?

Our findings

At our inspection of 1 October 2014 we found that the provider did not have a system to evidence that the premises were maintained. This was a breach of Regulation 15 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

The provider sent us an action plan outlining how they would make improvements.

We found that records were available which detailed the maintenance of systems within the service, which included gas safety and fire equipment.

People's records included a risk assessment of their home environment. This was to ensure that potential risks to them and staff were minimised and included information such as potential trip hazards within the person's home and the measures required in reducing the risk.

The provider had a policy and procedure for staff to follow should they arrive at a person's home and have to manage an emergency situation. The policy was for staff to contact the relevant emergency services if appropriate and inform the registered manager. Three of the four members of care staff had a valid first aid qualification, which would support people's safety. The fourth member of staff was registered to undertake the training.

One person who received a service told us they felt safe with the staff that supported them as they knew them well.

The provider's safeguarding and whistleblowing policies told staff what to do if they had concerns about the welfare of any of the people who used the service. Staff had received training in safeguarding which was part of their Diploma in Health and Social Care Award. Staff we spoke with were knowledgeable about their role and responsibilities in raising concerns with the management team and the role of external agencies, such as the local authority or the Care Quality Commission (CQC).

People's safety was supported by the provider's recruitment practices. We looked at recruitment records for staff. We found that the relevant checks had been completed before staff worked unsupervised at the service.

We found there were sufficient staff to meet people's needs and keep them safe. People we spoke with told us that staff were reliable and on time.

One person who used the service was promoted by staff to take their medicine as detailed within their plan of care. We asked staff what they would do if the person did not take their medicine. They told us they would inform the registered manager which was consistent with the provider's policy and procedure. This would ensure that an appropriate person could be informed in order that appropriate action could be taken if necessary.

Is the service effective?

Our findings

At our inspection of 1 October 2014 we found that the provider did not have suitable arrangements in place to ensure persons employed were appropriately supervised. This was a breach of Regulation 18 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

The provider sent us an action plan outlining how they would make improvements.

Staff records showed that staff were supervised by the registered manager which provided them with the opportunity to talk about the service they provided. Three of the four members of had recently been recruited and therefore an annual appraisal had not as yet taken place. The fourth member of staff who had worked for other aspects of the service which are not regulated by the CQC showed their work had been appraised.

Staff who support the two people who use the service told us they had regular contact with each other which enabled them to effectively communicate about the people they supported to ensure people's care was provided consistently and well.

Care records showed that the principles of the Mental Capacity Act 2005 (MCA) Code of Practice had been used when assessing people's ability to make decisions. The MCA is a law which provides a system of assessment and decision making to protect people who do not have the capacity to give consent themselves. People's records recorded that they were able to make informed decisions about their care. A member of staff told us, "[person's name], likes things done in a particular way, so we respect their wishes." This showed that staff supported people's decisions.

Staff told us about the training they had received; they told us that the training enabled them to meet the needs of people. Records showed that two members of staff had attained the Diploma in Health and Social Care and two members of staff were near to completing the diploma.

A person who receives a service is supported by staff with their breakfast, they told us, "They [care staff] help me with my breakfast." This was confirmed by staff provided their support who told us about the personal care and support they provided.

Is the service caring?

Our findings

People who use the service access other services, which are not regulated by the CQC, and when accessing these other services have contact with the staff that provide their personal care and support. This means that the people using the service know the staff well and have developed caring and positive relationships.

A person we spoke with told us, “The carers are good and they understand my needs.” A relative of the second person who receives a service told us, “Why not use the service, the staff that come to our home know us and my [person’s name] and staff understand each other.”

People’s daily notes which were completed by staff detailed the care and support provided along with any comments the person who used the service had made. People’s records included information as to the service they wished to receive and those that received a service told us they had a copy of their records within their home.

A person who used the service told us, “I have a choice about how I want things done.”

One carer we spoke with told us that on occasions the person they supported wished not to get up and so the carer returned later to assist them. This showed that people’s choices were respected.

Is the service responsive?

Our findings

At our inspection of 1 October 2014 we found that the provider did not review the needs of people who used the service. This was a breach of Regulation 9 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

The provider sent us an action plan outlining how they would make improvements.

People's needs had been assessed by a representative of social services, who had determined the person's needs with regards to personal care within their own home. People who received a service had made the decision to use the services of Leicester Jamaica Community Service Group – Caribbean Court to meet their assessed need.

We spoke with a member of staff and asked them about the care and support they provided to a person who used the service. They told us, "When I support [person's name], I need to be patient with them as they are sometimes

forgetful and so I remind them of where they are and what day it is." This showed that staff were understanding as to the needs of people and were able to respond appropriately.

One person who used the service had been supported for a year, whilst the second person had recently started receiving a service. The person and a relative told us that the service was meeting their needs, and that staff were reliable.

The complaints procedure was included within information provided to people who used the service. A person who used the service told us, "Everything is alright at the moment and I know what to do if I'm unhappy about something." The relative of the second person receiving a service told us, they would speak with the registered manager if they had any concerns.

The provider had not received any complaints or concerns.

People who use the service had the opportunity to comment on the service they received and meet with and speak with the registered manager and staff when they attended other services provided which are not regulated by the CQC.

Is the service well-led?

Our findings

At our inspection of 1 October 2014 we found that the provider did not have in place a system to audit the quality of the service, which included seeking the views of people who use the service and other interested stakeholders. This was a breach of Regulation 17 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

The provider sent us an action plan outlining how they would make improvements.

The service had a registered manager in post.

People who used the service told us they were confident to express their views about the service with the registered

manager. The provider did not have a system which formally sought people's views; however people using the service regularly had the opportunity to see the registered manager when accessing the other services they received. The registered manager told us that they understood that there would be a need to provide a robust quality assurance system should the service expand.

People who used the service and staff told us that the registered manager was approachable and available should they need to speak with them.

A person who used the service told us, "To me the service is ok, I would recommend it."