

AGL Care Ltd

The Tamarind

Inspection report

112 Ramsey Road
Dovercourt
Harwich
Essex
CO12 4RN

Tel: 01255507283

Date of inspection visit:
19 December 2018

Date of publication:
18 January 2019

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

We inspected The Tamarind on the 19 December 2018.

About the service: - The Tamarind caters for up to five people with learning disabilities. At the time of our inspection three people were using the service. The service had spacious living areas and was set over two floors. The service was set in a residential area with easy access to the local community and had a large garden. People in care homes receive accommodation and nursing or personal care as a single package under one contractual agreement. The Care Quality Commission regulates both the premises and the care provided, and both were looked at during this inspection.

People's experience of using this service:

People and relatives were very complimentary of the service and staff. One person said, "Everyone is wonderful here, they have helped me more than anywhere else." A relative told us, "We are really pleased with all aspects of care and their attention to detail."

The service was safe. Care and treatment was planned and delivered in a way that was intended to ensure people's safety and welfare. There were systems in place to minimise the risk of infection and to learn lessons from accidents and incidents. People were cared for safely by staff who had been recruited and employed after appropriate checks had been completed. People's needs were met by sufficient numbers of staff. Medication was dispensed by staff who had received training to do so.

The service was effective. People were cared for and supported by staff who had received training to support people to meet their needs. The registered manager had a good understanding of their responsibilities in relation to the Mental Capacity Act 2005 and the Deprivation of Liberty Safeguards. 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 support this practice.

People were supported to eat and drink enough to ensure they maintained a balanced diet and referrals to other health professionals were made when required. The environment was well maintained and suitable for the needs of people.

The service was caring. Staff cared for people in an empathetic and kind manner. Staff had a good understanding of people's preferences of care. Staff always worked hard to promote people's independence through encouraging and supporting people to make informed choices.

The service was responsive. People and their relatives were involved in the planning and review of their care. Care plans were reviewed on a regular basis. People were supported to follow their interests and participate in social activities. The registered manager responded to complaints received in a timely manner.

The service was well-led. The registered manager had systems in place to monitor and provide good care

and these were reviewed on a regular basis.

Rating at last inspection: Good (report published 1 April 2016)

Why we inspected: This was a planned inspection based on the previous rating.

Follow up: We will continue to monitor all intelligence received about the service to ensure the next planned inspection is scheduled accordingly.

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
Details are in our Safe findings below.

Good ●

Is the service effective?

The service was effective
Details are in our Effective findings below.

Good ●

Is the service caring?

The service was caring
Details are in our Caring findings below.

Good ●

Is the service responsive?

The service was responsive
Details are in our Responsive findings below.

Good ●

Is the service well-led?

The service was well-led
Details are in our Well-Led findings below.

Good ●

The Tamarind

Detailed findings

Background to this inspection

The 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.

Inspection Team:

The inspection was carried out by one inspector.

Service and service type:

The Tamarind caters for up to five people with learning disabilities. The care service had been developed and designed in line with the values that underpin the Registering the Right Support and other best practice guidance. These values include choice, promotion of independence and inclusion. People with learning disabilities and autism using the service can live as ordinary a life as any citizen.

The service had a manager who was in the process of registering with the Care Quality Commission. This means that they and the provider are legally responsible for how the service is run and for the quality and safety of the care provided.

Notice of inspection:

This inspection took place on the 19 December 2018 and was unannounced.

What we did:

Before the inspection, the provider completed 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. We reviewed previous reports and notifications that are held on the CQC database. Notifications are important events that the service must let the CQC know about by law. We also reviewed safeguarding alerts and information received from a local authority.

During our inspection we communicated with two people and observed their interactions with staff and

spoke with one person. We spoke with the manager, service manager and one care worker. We reviewed care files and records held in relation to the running of the service. During the inspection we rang and spoke with two relatives to gain their views and feedback on the service.

Is the service safe?

Our findings

Safe – this means people were protected from abuse and avoidable harm

Good: People were safe and protected from avoidable harm. Legal requirements were met.

Systems and processes

- People felt safe living at the service. One person told us, "I feel perfectly safe living here. All the staff have helped me."
- Staff knew how to keep people safe and protect them from safeguarding concerns. Staff were trained and able to identify how people may be at risk of harm or abuse and what they could do to protect them.
- Staff also knew how to 'whistle blow' and raise concerns outside of the organisation. We saw a poster displayed guiding staff how to raise concerns.
- The registered manager protected people from financial abuse and supported people and their guardians to manage their money.

Assessing risk, safety monitoring and management

- Staff had the information they needed to support people. Staff undertook risk assessments to keep people safe. These assessments were person centred and aimed at supporting people safely.
- The service had emergency plans in place and this included guidance to staff on fire evacuation procedures. We saw plans included specialist information for example, how to use evacuation mattresses should this be required.
- Staff knew how to raise the alarm if somebody suddenly became unwell and were trained in first aid.
- People were cared for in a safe environment. Safety certificates were held to demonstrate equipment was safe to use. For any maintenance requirements the registered manager employed people with the skills to complete these.

Staffing levels

- People received care from a consistent staff team who had the skills to deliver high quality care. Staff told us there were enough staff available to support people with all their needs, including trips into the community. One person told us, "There is always staff around I can talk to."
- A relative told us, "The good thing about the service is there is consistent staff who we know well and they know [person name]. They have worked together for years."
- The registered manager had an effective recruitment process in place and staff recruited were suitable for the role they were employed for

Using medicines safely

- Only trained and competent staff supported people with their medication. The registered manager ensured staff training was kept up to date and observed medication practices. Regular audits were completed to check medication was managed safely.

Preventing and controlling infection

- Infection control was closely monitored and processes were in place for staff to follow to ensure people were protected from infections.

Learning lessons when things go wrong

- The registered manager had systems in place to learn from risks, significant incidents or accidents at the service. Incidents were fully investigated and learning points were discussed at staff meetings and staff handovers.

Is the service effective?

Our findings

Effective – this means that people's care, treatment and support achieved good outcomes and promoted a good quality of life, based on best available evidence

Good: People's outcomes were consistently good, and people's feedback confirmed this.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law

- People's needs were consistently assessed and reviewed to ensure the care they received met their choices and needs. Care was managed and delivered within lawful guidance and standards.

Staff skills, knowledge and experience

- People continued to receive effective care from staff who were supported to obtain the knowledge and skills they needed to provide good care.
- One person told us, "The staff are all well trained and know what they are doing."
- Staff told us that training was delivered face to face from trainers and that they were also supported to achieve nationally recognised qualifications.
- New staff were given a full induction to the service and worked alongside experienced members of staff when they first started.
- Staff felt supported at the service. Staff told us they had regular staff meetings to discuss the running of the service and people's needs. The registered manager told us that they had supervision with staff and completed yearly appraisals.

Supporting people to eat and drink enough with choice in a balanced diet

- People were supported to have enough to eat and drink. Staff met with people and went through menu plans to identify people's likes and dislikes and adapted their request and diets to their needs.
- One person told us, "I can help myself to snacks and drinks. We have a choice over what is on the menu but if we do not like anything we can always have something else."
- Where people required support with special eating plans we saw the registered manager had got advice from dietitians and speech and language therapists.
- Staff supported healthy eating and monitored people's weight for signs of changes and sought medical advice where required.

Staff providing consistent, effective, timely care within and across organisations; Supporting people to live healthier lives, access healthcare services and support

- Each person had a health passport if they needed to access hospital care. The registered manager had been very proactive in supporting people to access the appropriate health support when required.
- People were registered with a local GP who completed reviews as required. People were also supported to have reviews with other healthcare professionals who were involved in their care such as the mental health team.
- One person told us, "The staff help me to see the GP when I need to go. When I was really ill once they all

looked after me."

Adapting service, design, decoration to meet people's needs

- The environment was appropriately designed and adapted to support people. The service was spacious, people had their own large rooms. We saw that all the rooms had been individually decorated the way people wanted them. The registered manager told us that they had recently had new carpets and there had been on going redecoration at the service.

Ensuring consent to care and treatment in line with law and guidance

- People who lack mental capacity to consent to arrangements for necessary care or treatment can only be deprived of their liberty when this is in their best interests and legally authorised under the Mental Capacity Act (MCA). The procedures for this in care homes and hospitals are called the Deprivation of Liberty Safeguards (DoLS).

- Staff knew how to support people in making decisions and how to facilitate giving them choice over day to day decisions and activities. The service took the required action to protect people's rights and ensure people received the care and support they needed. Staff had received training in MCA and DoLS, and had a good understanding of the Act. Appropriate applications had been made to the local authority for DoLS assessments. This told us people's rights were being protected.

Is the service caring?

Our findings

Caring – this means that the service involved people and treated them with compassion, kindness, dignity and respect

Good: People were supported and treated with dignity and respect; and involved as partners in their care.

Ensuring people are well treated and supported

- People were happy living at the service. One person told us, "I am happy here, the staff are fantastic and do a wonderful job."
- Staff we spoke with demonstrated they knew people well and spoke with kindness and fondness of people. One member of staff told us, "I have worked here for as long as people have lived here, we are like a family, we know each other so well."
- Relatives were very complimentary of the service. One relative told us, "[person name] sees Tamarind as his home, he would not want to go anywhere else." Another relative said, "Care and attention are so good, they have never given up on [person name] and have seen them through some really difficult times."

Supporting people to express their views and be involved in making decisions about their care

- Care was planned in a very person-centred way and staff had spent time getting to know people and the best way to communicate with them to get their views. Staff spent time going through people's care plans with them to discuss their aims, wishes and goals. One person said, "I have two keyworkers they help me with everything and go through my care plan." We saw that care plans were very detailed outlining people's likes/dislikes and preferences for care and support.
- Where appropriate families were involved with decisions about care, along with advocates and other healthcare professionals. An advocate is an independent person who is appointed independently to ensure a person's views and wishes are listened to and their best interest is supported.

Respecting and promoting people's privacy, dignity and independence

- Staff promoted people's privacy, dignity and independence. People were supported as individuals and had their own routines and activities they followed each day.
- Staff respected people's privacy and people had keys for their rooms. One person told us, "I have my own keys for the house and my room."
- We saw that staff had positive relationships with people and promoted their independence.
- People's confidentiality and privacy was protected. Records were stored securely.

Is the service responsive?

Our findings

Responsive – this means that services met people's needs

Good: People's needs were met through good organisation and delivery.

Personalised care

- People's care plans were detailed and had information about people's specific needs, their personal preferences, routines and how staff should best support them to live happy, contented lives. Each person's plan was regularly reviewed and updated to reflect their changing needs.
- Before people came to live at the service staff spent time getting to know them. A full pre-assessment was completed to identify how people could be best supported.
- The service remained responsive. We saw the registered manager had been very proactive in arranging equipment and specialist appointments with other health professionals when people's needs had changed to ensure they received the support they required.
- The registered manager had considered how to meet people's information and communication needs and was complying with the Accessible Information Standard. Staff were able to explain people's communication styles and we saw people were able to express their needs.
- People enjoyed varied pastimes and engaged in meaningful activities. One person told us, "I can come and go as I please, I spend a lot of time out with my partner." People were supported to have home visits and spend time with their families.
- We saw staff supporting one person with a game before going out on a trip to the community with them.

Improving care quality in response to complaints or concerns

- The registered manager had a complaints procedure in place and responded to any complaints in a timely way. Relatives told us they generally did not have any concerns but were happy the registered manager would deal with these if they did have.
- One person told us, "If I had any complaints I could talk to any of the staff."

End of life care and support

- The registered manager told us that people's end of life wishes had been discussed and people had funeral plans in place.
- There was not any end of life care being supported at the service but the registered manager knew how to access support when required.

Is the service well-led?

Our findings

Well-Led – this means that service leadership, management and governance assured high-quality, person-centred care; supported learning and innovation; and promoted an open, fair culture

Good: The service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements.

- The management team had a good oversight of what was happening in the service, and demonstrated an in-depth knowledge of all areas.
- There was a positive management structure in place which was open and transparent and available to staff when needed. The service manager told us, "Staff can always telephone me and they do, or they talk to me during training and meetings."
- Staff shared the manager's vision for the service to give people the best possible care that is safe and promotes well-being. One member of staff told us, "We want to make people happy and that they are well looked after."

Planning and promoting person-centred, high-quality care and support with openness; and how the provider understands and acts on duty of candour responsibility

- People and relatives were very complimentary of the service, staff and manager. One relative told us, "I have nothing but praise for all the staff."
- The registered manager understood their registration requirements including notifying us of significant events that happened at the service and displaying their latest report and rating. They were also aware of their duties under the new general data protection regulations. We found people's information was kept secure and confidentiality was maintained.
- People benefited from a staff team that worked together and understood their roles and responsibilities. Staff felt very supported by the registered manager and said they felt they had a good team. Staff told us that they had regular team meetings and handovers to discuss people's care.

Engaging and involving people using the service, the public and staff

- People were actively involved in improving the service they received. The registered manager gathered people's views on the service on a daily basis through their interactions with people. People's opinions had been sought on activities and the running of the service during house meetings. People also discussed menus and reviewed their care plans regularly with their key workers.
- The provider sent out a yearly questionnaire to people, relatives, staff and other health professionals to gain their feedback.

Continuous learning and improving care

- The registered manager had a number of quality monitoring systems in place to continually review and improve the quality of the service provided to people. They carried out regular audits on health and safety

and care records this information was used as appropriate to continually improve the care people received.

Working in partnership with others

- The registered manager involved other health professionals in peoples care and had worked in partnership with them to ensure people had the equipment they required such as appropriate wheelchairs.
- The service had been developed as a small family home in the middle of the community. The registered manager told us the home was inclusive in the local community and people regularly accessed community facilities.