

C J B Care Limited

The Stables

Inspection report

The Manor
Manor Croft
Burton On Trent
Staffordshire
DE14 1HJ

Tel: 01283530416

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07 February 2020
10 February 2020

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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

About the service

The Stables is a small home care agency providing support to people living in their own homes. At the time of the inspection The Stables was providing personal care and support to 26 people.

People's experience of using this service and what we found

People were protected from the risk of harm or abuse by staff who were well trained to deliver safe care and knew about acting promptly when they felt people were at risk. People and their relatives expressed confidence in the safe care and support provided by staff they found to be reliable and caring. Staff recruitment processes were safe and robust.

People and their relatives said staff safely supported them when they needed assistance to move, and any administration of medication by staff was well managed.

People's care and support needs were assessed and regularly monitored to ensure they were still current and being met. People's wishes, and legal rights were promoted and protected by staff who had received up to date training which the staff felt equipped them well to deal with any issues.

People were supported to have maximum choice and control of their lives and staff advised they had been trained to support them in the least restrictive way possible and in their best interests. People made positive comments about the care and support they received from staff who regularly worked with them.

People were cared for by staff who showed regard for their well-being and relatives commented that people received personalised care from the staff who supported them in ways they preferred.

Relatives advised the staff responded well to changes in how people were to be supported, providing prompt support when people were unwell or had increased care needs. Requests for any short-term changes were also attended to promptly and always met. Agreed plans of care reflected the full care and support needs of people.

People and their relatives expressed confidence that any concerns or complaints would be properly addressed. Concerns or complaints were responded to in line with the providers policy and procedures.

The registered manager was known by people who used the service and their relatives. Staff and relatives made comments about the registered manager being approachable supportive. The provider had regularly sought feedback on the quality of the service through the use of questionnaires with people and their relatives. The registered manager had plans in hand to improve and share information from the analysis of the questionnaires returned. The quality of care provided was regularly checked by the registered manager to ensure the providers set standards were maintained.

Why we inspected

This was a planned inspection based on the previous rating.

Rating at last inspection

The last rating for this service was good (report was published in August 2017)

For more details, please see the full report which is on the CQC website at www.cqc.org.uk

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 Stables

Detailed findings

Background to this inspection

The inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 (the Act) as part of our regulatory functions. We checked whether the provider was meeting the legal requirements and regulations associated with the Act. We looked at the overall quality of the service and provided a rating for the service under the Care Act 2014.

Inspection team

The inspection was undertaken by one inspector.

Service and service type

This service is a domiciliary care agency. It provides personal care to people living in their own homes.

The service had a manager registered 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

We gave the service 48 hours' notice of the inspection. This was because it is a small service and we needed to be sure the registered manager would be in the office to support the inspection.

Inspection activity started on 5 February 2020 and ended on 10 February 2020. We visited the office location on 5 February 2020.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. The provider was not asked to complete a provider information return prior to this inspection. This is information we require providers to send us to give some key information about the service, what the service does well and improvements they plan to make. We took this into account when we inspected the service and made the judgements in this report.

We used all this information to plan our inspection.

During the inspection

We reviewed a range of records. This included two people's care records together with assessment and review records. We looked at one staff file in full and another staff file in relation to recruitment and staff supervision. We also looked at the full staff training matrix. In addition to these records we looked at a small selection of other records relating to the management of the service, including policies and procedures.

After the inspection

We sought feedback from three people who used the service, five relatives and two members of staff.

Is the service safe?

Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm.

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse; Assessing risk, safety monitoring and management

- There were procedures and guidance that were followed to ensure people were safeguarded from the risk of abuse by staff who knew how to recognise issues of concern and raise an alert.
- Staff were clear about actions and processes they would follow to report any concerns should they arise. People were supported to keep safe by staff who demonstrated good knowledge about people's known risks. People had risk assessments in place for everyday situations and for routine activities of daily living.
- One person said, "I never worry, they [staff] always lock the door when they leave." Relatives told us they were confident in the ability of staff to act on any issues should they arise. One relative said, "They [staff] are fantastic at keeping people safe. I have no qualms at all that they would take action." A relative said, "They are very careful about how they move [name of person] I have no concerns." They then advised, "The staff are skilled in how they use the moving equipment and make a record in the notes of what equipment they have used. It varies dependent on how [name of person] is on the day."

Staffing and recruitment

- Full checks were undertaken on staff before they started work with the service to make sure they were suitable to work with people in their own homes.
- Relatives advised there were always the correct number of staff on each visit to provide the agreed levels of care and support. One person said, "There are always two care staff as we agreed and there is never any issue with staff. They are timely and never miss a call."

Using medicines safely

- Staff received training in how to safely administer medication to people following clear procedures. People received as much help with their medication as they needed. One person said, "They administer medication to me when they are in my home but when we are out, they remind me to take it." A relative said, "The two carers always do the medication together checking that everything is in order."
- Records were maintained by staff detailing medication administration and application of any prescribed creams or lotions. All completed records were returned to the office for checking and auditing purposes.

Preventing and controlling infection

- Staff were provided with personal protective equipment including gloves and aprons as needed to reduce the risk of cross infection when supporting people.

Learning lessons when things go wrong

- The registered manager advised they always reviewed and followed up on any incidents or occurrences to

check staff had taken appropriate action, and to identify any lessons to be learnt.

Is the service effective?

Our findings

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

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant 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 care and support needs were regularly reviewed and reassessed. The registered manager advised initial visits to people were carried out by them or senior staff to undertake a full and detailed assessment of their care and support needs.
- On starting to use the service, the assessment information had been used to inform individual care plans which were put in place. Care plans were clear and contained information about how the person liked to be supported. One staff member said, "The care plans are well organised and information easy to find. We have good communication from others and the office about any changes if people are unwell or have changed needs."

Staff support: induction, training, skills and experience

- Staff received and induction before commencing employment with the agency, One staff member said, "New staff do not work alone until they have been assessed and completed their induction. I have had new staff shadowing me whilst they are on induction."
- There were clear records detailing training that had been provided for staff, alongside plans of training due to be provided, to enable them to confidently support people. One staff member said, "The training is good, and they [management] respond well to requests for training identifying if it is right for us."

Supporting people to eat and drink enough to maintain a balanced diet

- Staff ensured that people who needed support to maintain a balanced diet were served food and drink in line with their care plans. One person said, "Staff do notice how much fluid I have had and comment positively about it. They fill in charts to record what I have had." A relative advised the staff always ensured drinks were left near to the person when they finished their care tasks.

Staff working with other agencies to provide consistent, effective, timely care; Supporting people to live healthier lives, access healthcare services and support

- The registered manager advised staff had experience of liaising and working with healthcare professionals such as district nurses when needed to help people to keep well and continue living safely in their own homes.
- One person said, "When staff are concerned about my health, they discuss their concerns with me and ask me if I have called a doctor, which I then arrange to do."
- One relative advised the service had provided good care from the start and met the person's needs. They added, "Without this agency the care support would have folded for [name of person]."
- One relative commented positively on the action taken by staff to identify and act on health concerns

telling us, "They [staff] are good at letting me know if they have noticed changes or have concerns so that I can then take action."

- People received visits which were timely and the registered manager monitored this aspect of the service from electronic records of staff logging in and out of calls. Urgent information or short notices about changes in care were alerted to staff via secure mobile phone messaging.

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

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.

When people receive care and treatment in their own homes an application must be made to the Court of Protection for them to authorise people to be deprived of their liberty.

We checked whether the service was working within the principles of the MCA and whether any conditions on authorisations to deprive a person of their liberty had the appropriate legal authority and were being met. We found that any such conditions in place were known and followed by staff. When people were unable to make their own decisions, we were informed by relatives that they were involved together with the person in making best interest decisions.

- Peoples legal rights were protected, and staff had a good understanding of how to support people to make decisions about how their care and support needs were being met. Staff provided people with opportunities to make choices in all aspects of their care and best interests decisions were made involving families and professionals whenever possible.

Is the service caring?

Our findings

Caring – this means we looked for evidence that the service involved people and treated them with compassion, kindness, dignity and respect. At the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant people were supported and treated with dignity and respect; and involved as partners in their care.

Ensuring people are well treated and supported; respecting equality and diversity

- Each person's preferences about how they were to be supported was recorded and staff said they liked providing continuity of care as it was usually the same staff who supported each person. One relative confirmed this saying, "There are four main carers who do the calls, they are great." One person said, "I can't always remember who is coming but as its one of the same few people it's okay; they are reliable."
- A relative said when they had seen staff during visits they noted, "The staff have a good relationship with [name of person]." One person said, "The staff are so lovely, they do what they are supposed to... They are very nice staff."

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

- The registered manager had ensured people's rights were upheld in how the care and support was initially planned to be delivered by staff. As well as being involved in agreeing the care plan, the registered manager or senior staff undertook unannounced spot check visits when they accompanied staff on the calls to check the quality of the care was being provided as planned.
- People and, where appropriate, their relatives were involved in the regular reviews of care plans. One person advised, "When I have requested changes are made, they have done this." One relative said, "The reviews are very inclusive we are both really involved [by the staff]. Changes are made when these are requested."

Respecting and promoting people's privacy, dignity and independence

- One relative said staff were good at encouraging their relative to be independent, "[They are] very good at encouraging [name of person] to do things; staff offer practical advice and support."
- People were supported by staff who upheld each person rights to have their privacy and dignity respected." One person said, "Staff care about me and how I feel about having care."
- One relative advised that staff responded well when the person had other health appointments and visited earlier than usual as requested. They added, "This happened irrespective of which staff it is they are spot on, I highly recommend them."

Is the service responsive?

Our findings

Responsive – this means we looked for evidence that the service met people's needs. (

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant people's needs were met through good organisation and delivery.

Planning personalised care to ensure people have choice and control and to meet their needs and preferences

- Each person had a personalised care and support plan which reflected their preferences and wishes in respect of how their care needs were to be met.
- Care and support was provided by staff who knew everyone well and all staff were up to date with any changes in how care was to be provided. A system was used by the provider to ensure the staff received alerts if there was a change to people's support needs or circumstances.

Meeting people's communication needs

Since 2016 onwards all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard (AIS). The standard was introduced to make sure people are given information in a way they can understand. The standard applies to all people with a disability, impairment or sensory loss and in some circumstances to their carers.

- The registered manager had developed clear care plans which were based around discussion with people and presented in plain language to make them clear and accessible.

Improving care quality in response to complaints or concerns

- People and relatives expressed confidence that any complaints they raised would be listened to and responded to by the registered manager. One person said, "When I did make a complaint, they took it very seriously and I got a response from the manager." A relative advised, "I can ring the office and the staff seem to know [name of person] and deal with whatever query I have." Another relative said, "If I had any concerns I would, and can just phone up and speak to the manager or senior staff."
- There was an accessible complaints procedure in place to deal with any complaints received.
- Staff referred to action they would take to advocate on behalf of people and raise complaints themselves if they had any concerns. Staff also expressed confidence that any concerns raised would be responded to by the registered manager. Staff could advise of action they would take if issues were not addressed.

End of life care and support

- No one was receiving support for end of life care at the time of the inspection.
- The registered manager advised that when providing of end of life care they had ensured that specific wishes were agreed and recorded in care plans. They had also recorded details about who would take care of deciding to support last wishes including funeral arrangements in line with the persons own wishes or preferences.

Is the service well-led?

Our findings

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

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

- One person who advised they had moved to using this service from another commented, "They have met my needs from the start."
- Relatives were positive about the support provided to people using the service and to themselves. One relative commented about the care provided and said, "[The support provided] takes a lot of pressure off me to help me cope." Another relative said, "The service is very stable, the care plan is unchanged and I'm very happy with the service."
- Staff commented positively on the support they received from the registered manager. One staff member said, "The staff meetings are useful and enjoyable. We hear about training and what changes might be coming. We also have regular supervision meetings and get an annual appraisal."

How the provider understands and acts on the duty of candour, which is their legal responsibility to be open and honest with people when something goes wrong

- The registered manager advised that regular contact was maintained with relatives and people who used the service. There was a process in place to share information with relatives and others should any incident occur.
- The registered manager was open and transparent throughout the inspection process.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; Continuous learning and improving care

- The registered manager undertook regular reviews of the support provided and after consultation made changes as needed in the level of support required.
- The registered manager said the service did not use agency staff. They added that they had also worked with staff members to reduce any reliance on the providers own bank staff by clear rostering and allocation of clients to teams of carers which improved continuity and consistency. Staff absences were covered by permanent staff and all seniors and managers within the service maintained up to date training in care practices to cover absences when necessary.
- The registered manager had a clear focus on regularly checking the quality of all aspects of the service. The findings from audits and checks were used to identify when changes were needed to maintain the quality of the service or to make further improvements. Direct checks on the quality of the care provided included unannounced observed practice sessions for all staff where the registered manager or deputy worked alongside care staff.

- The registered manager advised they were supported by the Area Manager and requests for training were well received and responded to. The audits conducted by the registered manager and senior staff were quality checked by the provider's senior staff.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- The agency produced newsletters for people using the service and took the opportunity to share information about some of the providers events they could attend, such as a bonfire BBQ or celebratory parties. There were photographs in scrapbooks which were compiled after events people had attended which were shared with those who had attended.
- The registered manager had sought feedback from people who used the service and their relatives by using an easy to complete questionnaire about aspects of the service. Full analysis had been undertaken however the analysis had not been shared with people using the service. The registered manager advised they were keen to further develop this and to routinely provide feedback on the findings.

Working in partnership with others

- The registered manager said staff had a good working relationship with healthcare professionals and other agencies when they were involved in supporting people to continue living in their own homes.
- The registered manager advised they had opportunities to meet regularly with managers from the provider's other services to share information about good practice and developments. In addition, they were part of an informal network with other registered managers of care at home services in the area which they found helpful. The local authority held regular provider and registered managers meetings which the registered manager advised were informative.