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J&R Care Services

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

About the service

J&R Care Services is a domiciliary care provider providing personal care to people living in their own homes, so they can live as independently as possible. At the time of our inspection there was 1 person using the service.

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

Systems were in place to ensure people were safe from the risk of abuse. Staff completed safeguarding training in recognising and reporting abuse and the provider has a safeguarding policy in place. Staff followed infection prevention and control practices and there was an infection control policy in place including procedures to follow in relation to COVID 19.

There were enough staff to meet people's needs. There was a safe recruitment process in place to ensure staff were recruited safely and appropriate checks were completed prior to employment.

Assessments of people's needs were completed and people were involved in creating personalised care plans, which included guidance for staff on supporting people with their individual needs.

The service was caring and staff were respectful. Staff had developed positive relationships with people and treated people with kindness and compassion. The provider focused on promoting people's independence in their own homes.

Care plans were detailed and clearly described people's needs. Care plans were reviewed when people's needs changed. A complaints policy was in place and people knew how to raise a concern.

People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible and in their best interests; the policies and systems in the service supported this practice.

The provider had a good oversight of the service. There were systems in place to monitor the quality of the service. Regular audits were carried out to ensure risks were identified and action taken to minimise any risk. People's feedback was sought to drive improvements.

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

Rating at last inspection and update

The last rating for this service was requires improvement (published 31 October 2019) and there were breaches of regulation. The provider completed an action plan after the last inspection to show what they would do and by when to improve. At this inspection we found improvements had been made and the provider was no longer in breach of regulations.

Why we inspected

This inspection was prompted by a review of the information we held about this service.

Follow up

We will continue to monitor information we receive about the service, which will help inform when we next inspect.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

Good ●

The service was safe.

Details are in our safe findings below.

Is the service effective?

Good ●

The service was effective.

Details are in our effective findings below.

Is the service caring?

Good ●

The service was caring.

Details are in our caring findings below.

Is the service responsive?

Good ●

The service was responsive.

Details are in our responsive findings below.

Is the service well-led?

Good ●

The service was well-led.

Details are in our well-led findings below.

J&R Care Services

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 Health and Social Care Act 2008.

Inspection team

The inspection was completed by 1 inspector.

Service and service type

J&R Care Services is a domiciliary care agency. It provides personal care to people living in their own houses and flats.

Registered Manager

This provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations.

At the time of our inspection there was a registered manager in post.

Notice of inspection

We gave the service 24 hours' notice of the inspection. This was because the service is small and we needed to be sure the registered manager would be in the office to support the inspection.

What we did before the inspection

We used the information the provider sent us in the provider information return (PIR). This is information providers are required to send us annually with key information about their service, what they do well, and improvements they plan to make. We used information gathered as part of monitoring activity that took place on 12 April 2022 to help plan the inspection and inform our judgements. We used all this information

to plan our inspection.

During the inspection

We spoke with the registered manager, administrator and 1 person who used the service and 1 relative. We reviewed a range of records, including care records. We looked at recruitment files and a variety of records relating to the management of the service were reviewed including policies and procedures.

Is the service safe?

Our findings

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

At our last inspection we rated this key question requires improvement. At this inspection the rating has changed to good. This meant people were safe and protected from avoidable harm.

Staffing and recruitment

At our last inspection recruitment procedures were not sufficient to ensure fit and proper persons were employed. This was a breach of regulation 19 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 19.

- There was a safe recruitment system in place and the service had enough staff. People received their care calls on time.
- Recruitment files evidenced appropriate checks were carried out prior to employment. This ensured people were recruited safely and fit for their roles.

Systems and processes to safeguard people from the risk of abuse

- Systems were in place to protect people from the risk of abuse.
- Staff received safeguarding training on how to recognise and report abuse.
- A safeguarding policy was in place and the provider had access to other agencies to protect people from risk of abuse.

Assessing risk, safety monitoring and management

- There was clear guidance in place for staff to support people safely. This was reviewed when people's needs changed.
- Environmental risk assessments were in place and people were involved in managing risks to themselves and decisions to keep them safe.

Using medicines safely

- People received appropriate support to take their medicines safely.
- Medication administration records (MARs) were completed in line with best practice.
- The provider ensured regular checks and audits were completed in relation to medicines. For example, MARs were regularly checked and where errors were identified, action was taken.

Preventing and controlling infection

- There was an up-to-date infection control policy and the registered manager followed appropriate

guidance to reduce the risk of infection.

- Staff understood and followed appropriate guidance in infection prevention and control.

Learning lessons when things go wrong

- The provider had a process in place for managing accident and incidents. The registered manager understood the need for accidents and incidents to be investigated and lessons learnt to minimise risk of avoidable harm.
- We saw a MAR audit which identified a missing signature, action was taken by communicating to staff, giving staff an opportunity to learn to avoid re-occurrence.

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 our last inspection we rated this key question requires improvement. At this inspection the rating has changed to good. 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 plans reflected their diverse needs and choices and there was clear guidance in place for staff to support people safely.
- People were involved in reviewing and formulating their care plans.
- Care plans included detail on enhancing people's independence, for example, communicating with people to encourage them to feel safe when moving independently.

Staff support: induction, training, skills and experience

- The provider ensured training was available for people who worked at the service.
- We reviewed the staff training matrix and training was up to date and appropriate to meet the needs of the people using the service.

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

- People were supported to have a good dietary intake. There was detailed information on food preferences and preparation in people's care plans.
- People did their own shopping and expressed how and when they would like their meals prepared.

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 understood the importance of working with other agencies to provide effective care.
- People played an active role in maintaining their own health and wellbeing, for example people had access to their GP or healthcare professional and were able to contact them. The registered manager told us, "Any support the client needs, I am here to provide it".

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

The Mental Capacity Act 2005 (MCA) provides a legal framework for making decisions on behalf of people who may lack the mental capacity to do so for themselves. The MCA 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 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.

- The service worked within the principles of the MCA. People were involved in decisions about their care and consent was sought before care was delivered.

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 our last inspection we rated this key question good. The rating for this key question has remained good. 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

- People were treated with kindness and respect. One person told us, "The service is very good, they are always consistent and thorough with everything, I've always felt like that I'm in good hands".
- People's care plans were written in detail for staff to deliver person centred care holistically. For example, care plans included detailed daily routines, past occupation and personal interests.

Supporting people to express their views and be involved in making decisions about their care; Respecting and promoting people's privacy, dignity and independence

- People and their families, where appropriate, were involved in decisions about their care. Consent forms were completed to show people were happy with their care plans.
- People's independence was promoted, for example, staff ensured mobility equipment was placed in the correct place and position to enable them to access these comfortably.
- The provider focused on people's privacy and dignity, care plans included people wishes and what additional support was needed. One relative told us, "Their work is remarkable and all is really good".

Is the service responsive?

Our findings

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

At our last inspection we rated this key question good. The rating for this key question has remained good. 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

- Care plans were personalised and detailed and staff understood people's needs well.
- Daily records were completed thoroughly to ensure staff had up-to-date information on people's needs and overall wellbeing.
- The providers statement of purpose focused on people's individual needs and expectations in-order to promotes people's independence in their own homes.

Meeting people's communication needs

Since 2016 all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard. The Accessible Information Standard tells organisations what they have to do to help ensure people with a disability or sensory loss, and in some circumstances, their carers, get information in a way they can understand it. It also says that people should get the support they need in relation to communication.

- The provider met the AIS standard; care plans included the assessment of communication needs. Whilst no-one using the service needed support with their communication needs at the time of our inspection, assessments were in place and the provider understood their responsibilities in relation to this.

Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities that are socially and culturally relevant to them

- People were supported to follow their interests, for example, a person was supported with painting in their own home.
- At the time of our inspection, no one using the service needed support with accessing the community, however the provider understood the importance of supporting people who needed to access the community and maintain relationships important to them.

Improving care quality in response to complaints or concerns

- The provider had a complaints policy in place. There had not been any complaints received at the time of inspection.
- People and relatives were happy with the support received and they felt comfortable to raise any concerns. One relative told us, "If I had concern, I would have an open and honest conversation with [registered manager], however I genuinely have no concerns at all."

End of life care and support

- At the time of inspection, no one using the service was considered to be reaching the end of their lives. The provider had an end of life policy in place.

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 our last inspection we rated this key question requires improvement. At this inspection the rating has changed to good. This meant 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; Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

At our last inspection there were not effective systems in place to ensure good governance of the service. This was a breach of regulation 17 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 17.

- The provider who worked as the registered manager had clear oversight of the service and was focused on providing high-quality person-centred care.
- Systems were in place to monitor the performance of the service. The provider ensured regular audits of care plans and MARs were completed to improve the quality of service.
- Although there had been no accidents or incidents, there was a system in place to record, review and monitor accidents and incidents. We saw accidents and incident forms in place, which included space for actions to be taken. This ensured risk to people were minimised.
- The provider regularly sought feedback. Client satisfaction questionnaires were sent out to people using the service to gain feedback.
- People provided positive feedback on the service. One person said, "They are very punctual, never let me down and they are approachable."

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

- This service was well led. People and their relatives spoke highly of the service. One relative told us, "They are reliable and the service is really good."
- The provider focused on achieving good outcomes for people and understood the need for change with peoples changing needs.

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 understood their responsibilities to complete statutory notifications.

- The registered manager promoted open communication within the service.
- Since the last inspection, the provider was open and honest about the constraints faced and told us about changes to the service they have made to ensure people's needs are met.

Continuous learning and improving care

- The provider had a positive approach to learning, development and improving care. The provider was focusing on the opportunity to increase the size of the service.

Working in partnership with others

- The provider had access to healthcare professionals and understood the process of making referrals to other agencies where there was need.