

C J B Care Limited

The Stables

Inspection report

The Manor
Manor Croft
Burton On Trent
Staffordshire
DE14 1HJ

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20 July 2017

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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

We inspected this service on 20 July 2017. This inspection was announced. This meant the provider and staff knew we would be visiting the service's office before we arrived. There were 35 people in receipt of personal care support at the time of this inspection visit. This was the first inspection since the provider's registration on the 4 August 2016.

The service had a registered manager in post. 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.

People received care that was planned to meet their needs and received their calls as agreed. Some people told us they were not informed if staff were running late. We fed this back to the management team who confirmed they would take immediate action to address this. Checks were undertaken on staff's suitability before they began working with people. Staff understood their role in protecting people from harm and people received their medicine as required.

People were supported by staff that received training to improve their knowledge of care and enhance their skills. Staff were provided with supervision by the management team to monitor their conduct and support their professional development. When needed, people were supported to maintain their dietary requirements and preferences and to access healthcare services. Staff supported people to maintain their dignity when providing care and enabled them to be as independent as they could be.

People's needs and preferences were understood by the staff that supported them and staff were caring towards them. People were supported to have maximum choice and control of their lives because staff understood the importance of gaining consent from people.

People and their representatives were able to review their care to ensure it was still appropriate for them. People and their representatives found the provider approachable and were given opportunities to comment on the care they received and be involved with plans for the future. People knew how to complain and we saw when complaints were made these were addressed. There were audits in place to monitor the quality of the service to drive improvements. The provider understood their responsibilities around registration with us.

Further information is in the detailed findings below.

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.

People were protected by staff that understood how to protect them from harm. People's health and welfare was assessed and actions to minimise risks were in place and followed by staff. There was enough staff to support people. The provider checked staff's suitability prior to employment. People were supported to take their medicines as prescribed.

Is the service effective?

Good ●

The service was effective.

People's consent was sought regarding the care they received. People that were unable to make their own decisions were supported in their best interests. People were supported by staff whose practice was monitored to ensure any training needs could be identified. Where needed people were supported to eat and drink enough to maintain their health, and staff monitored people's health to ensure any changing health needs were met.

Is the service caring?

Good ●

The service was caring.

Staff supported people in a caring way and encouraged them to maintain their independence. People were treated with respect and their dignity and privacy was respected.

Is the service responsive?

Good ●

The service was responsive.

The support people received was tailored to meet their needs and preferences. The provider's complaints policy and procedure was accessible to people and they were supported to raise any concerns.

Is the service well-led?

Good 

The service was well led.

People were encouraged to share their opinion about the quality of the service to drive improvements. The staff were given guidance and support by the management team to enable them to provide effective care. Systems were in place to monitor the quality of the service provided.

The Stables

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 checked 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 comprehensive inspection took place on 20 July 2017 and was announced. The provider was given three working days' notice because the location provides a domiciliary care service and we needed to be sure that someone would be available at the office. We also needed to arrange to speak to people who used the service and their relatives as part of this inspection prior to the office visit. The inspection team consisted of one inspector and an expert by experience. An expert-by-experience is a person who has personal experience of using or caring for someone who uses this type of care service. The expert-by-experience did not attend the office base of the service, but spoke by telephone with people who used the service and their relatives.

We did not send the provider a Provider Information Return (PIR) prior to this 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. However, we gave the registered manager the opportunity to provide us with information they wished to be considered during our inspection.

We spoke with eight people who used the service and six relatives. We spoke with three care staff, the registered manager, deputy manager and the operations manager. We did this to gain people's views about the care and to check that standards of care were being met.

We looked at the care records for three people to check that the care they received matched the information in their records. We also looked at records relating to the management of the service, including quality checks and staff files.

Is the service safe?

Our findings

People felt safe with the staff that supported them. One person told us, "I do feel safe. They're very nice people, nothing bad happens, they all do their job." Another person told us, "They come five days a week and we are very satisfied with the care and the safety which is wonderful." Staff were aware of the signs to look out for that might mean a person was at risk of harm. They knew the procedure to follow if they identified any concerns or if any information of concern was disclosed to them, this included reporting concerns to the local authority safeguarding team if needed. One member of staff told us, "I don't think I would need to report to the local authority here as the manager would do that but I am aware that we can."

People confirmed that the staff ensured their safety was maintained before they left. One person told us, "I don't have the door locked but it is locked at night and the staff use the key safe. I've got a pendant and they always check I have it on." Another person said, "I feel secure. I like to have my door left open but they always ask if I want it closed. I've got a pendant and they always check I've got it on."

Risk assessments directed staff on how to minimise risks to people, such as on the equipment needed to support them to move safely and on their home environment. This showed us that risks were managed to keep people who used the service and to keep staff safe. Staff spoken with knew about people's individual risks and explained the actions they took to keep people safe, this included any specialist equipment that was used for individual people. A relative told us, "[Name] is safe with all of them when they are hoisted and moved." One member of staff confirmed what we read in a person's care records. They told us, "I support [Name] with their personal care. They use the hoist and also need regular suction; this depends mainly on conditions in the air temperature. I have had all the training and record all procedures I undertake."

The care provided was dependent on the level of support each person required. People told us that staff were available to support them as agreed and the majority confirmed that staff arrived within the agreed time frame for their visit. One person said, "The staff stay the time and a bit over. I live in a busy area but they're generally here within five minutes." Some people told us that staff did not always contact them if they were running late. We discussed this with the operations manager who said they would send a memo out to staff and discuss with the staff at the next team meeting that they must let people know if they are held up.

People confirmed they were supported by a consistent staff team. One person told us, "They're regular staff. I know most of them but I can't remember names. I recognise them by face." Another person said, "Regular carers I do get, they come morning and evening. One helps me shower in the morning and one to do my evening support." A relative told us, "They're regular staff, yes. It's the same four and [Name] knows them well."

People who used the service told us they knew how to contact the office and confirmed that the contact number was in the documentation they had been given. One person told us, "I know who is the owner is, and I know [the operations manager] at the office. If I do ring up about anything it's always dealt with. It's

very good."

We looked at the recruitment checks and saw that all the required documentation was in place. We saw the staff had Disclosure and Barring Service (DBS) checks undertaken. The DBS is a national agency that keeps records of criminal convictions. This demonstrated the provider checked staff's suitability to deliver personal care to ensure they were suitable to support people.

Some people received support to take their medicines and confirmed this was done in their preferred way. A medication administration record (MAR) listed people's prescribed medicines and when they should be given. Staff recorded when they had supported a person to take their medicine. Staff confirmed and we saw they had undertaken medicine training. For those people who required support, a MAR was kept in their home which was sent to the office for the management team to audit. We looked at these records and saw that staff signed when people had taken their medicine or recorded if not and the reason why. This showed us a clear audit trail was maintained to monitor people's medicine administration.

Is the service effective?

Our findings

People confirmed that they were happy with the support they received from staff and confirmed the staff had the necessary skills and training to meet their needs. One person told us, "With the new staff, it's about experience but they do go through their training and regulations, and they're okay." A relative said, "All the carers are skilled. The provider makes sure any new staff have done peg feeding and tracheostomy training. All of the staff that support [Name] have done the training."

Staff told us and we saw that they received induction and training. One member of staff told us, "I have had all the training including training that's specific to the people I support. The training is very good. Even when I first started the training was all done within a couple of weeks. The provider is lovely, very supportive. If you want any additional training he sorts it out." Another member of staff said, "A group of us have had PEG training for the person we support." A Percutaneous Endoscopic Gastrostomy is a medical procedure in which a tube (PEG tube) is passed into a person's stomach, usually to provide a means of feeding when oral intake is not adequate or possible.

The staff files we saw had evidence that staff received supervision; this included spot checks on a regular basis to monitor their performance. This showed us that the staff were supported, to enable the provider to identify their future training and development needs.

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).

We checked whether the provider was working within the principles of the MCA. The information in people's assessments and care plans reflected their capacity when they needed support to make decisions. We saw that where people were unable to make decisions independently, they were made in their best interests in accordance with the Act. Staff understood the principles of the MCA and understood their responsibilities for supporting people to make their own decisions. One member of staff told us, "[Name] is able to make decisions but they need some help. So in the morning I will get three or four outfits out of the wardrobe and they pick the one they prefer. With meals I show them what's available and they choose" Staff told us they obtained people's consent before they supported them and people we spoke with confirmed this. For example one person told us, "They will say, 'what shower gel do we use today?' They always ask me." We saw that where people had capacity, they signed their care plans to demonstrate their consent.

Some people we spoke with were supported with meals and told us they were happy with how this was done. Where people were supported with food and drink this was recorded as part of their plan of care and their specific preferences and diets were recorded, to ensure their needs could be met. We saw that where

people had been identified at nutritional risk, staff monitored what they ate and drank to enable them to alert the person's family or seek professional guidance as needed. One person told us, "Food records the carers do, they write it all down." One member of staff told us they were the nutrition champion for the service. They showed us guidance from the NHS that they used to remind and support people to drink sufficient fluids every day to maintain their hydration needs. They told us, "I have copies of the guidance to give out to people. It's just a simple reminder really to make sure they drink enough."

People's health care needs were documented as part of their care plan and support was provided when needed. One person told us, "This morning I asked for a home visit and my carer talked to the doctor's surgery about it on the phone." Another person said, "I remember one evening when I wasn't well and the carer phoned for an ambulance and they kept me in for a fortnight, so what the carer did was the right thing to do."

Staff told us that if they had any concerns about people's health they would inform the management team who would contact the person's relative or doctor as needed. Relatives spoken to confirmed this. One said, "Anything health changes they notice; they definitely tell me, we work as a team."

Is the service caring?

Our findings

People told us that staff were caring. One person told us, "The carers are all approachable. I can't speak for others but they treat me well". A relative told us, "I'm over the moon with the way they care for [Name]. I go out to golf and I don't have a care in the world. [Name] is very happy. At first the staff were strangers but now [Name] recognises them. On the first day they came [Name] wouldn't let them in the house, but now they greet them." Staff we spoke with demonstrated a caring attitude. One member of staff said, "I treat people as I would my own mum and dad." Another member of staff said, "The people I support are like extended family to me."

People told us that staff were respectful towards them and supported them to maintain their dignity. One relative told us, "[Name] has a towel wrapped around them and when they go to the bedroom to have their cream done the staff cover [Name] over." Another relative said, "[Name] has medication at lunchtime and they go to a café area to do the medicines, it's a private area facing [Name] away from people."

People confirmed their preference in staff gender was discussed with them prior to using the service. One person said, "I have been asked about my preference in staff gender, and told them it doesn't bother me."

People were supported and encouraged to maintain their independence. One person told us, "The staff are getting me to do more for myself as I'm getting better. I'm still forgetful, and I went to the shop the wrong way, and the staff showed me a short cut. I'm getting there, slowly." A relative said, "[Name] isn't very mobile but the staff support them to do as much for their self as they can."

Is the service responsive?

Our findings

Staff supported people with a variety of tasks, from personal care support, preparing meals and taking their medicine. People told us that their carers understood their needs and were capable of delivering the service that they required in their preferred way. One person said, "All calls are to get me up as my balance is very bad and it's only in the morning I need the most help. The care plan is clear to them. I haven't had anybody new for ages; all the carers know the routine." A relative told us, "They chat with [Name] while they do the care. They're quite used to knowing how [Name] likes things done." Another relative said, "They are good, yes, they know all about dementia. The staff do things with [Name] that they know [Name] likes doing."

Discussions with people and their care records showed they had been involved in their care and their views had been gained about what was working and any changes they felt were needed. One person told us, "We have reviews of the care plans; it was about a year we go we had one, but we're always in touch. At the moment we are talking about the equipment we need and we're working together all the time."

Staff told us they worked well as a team to ensure people were supported according to their needs and preferences. One member of staff said, "The team work is very good. We all help each other out."

People we spoke with were aware of the procedure for making complaints and told us they would feel comfortable if they ever had the need to do this. One person said, "Concerns I haven't had to contact them about, but there is a book with a name in it who I can contact." Another person said, "If I had a complaint, I'd be happy to contact them." We saw complaints received were recorded including the actions taken and outcome.

Is the service well-led?

Our findings

People and their relatives told us they were happy with the service provided. One person said, "I've spoken to the provider and I feel confident. I've got a good rapport with the carers; we sit and talk about anything and everything. So far, it's gone as expected I have no qualms." Another person said, "We're comfortable with them. I'm satisfied. I found a little pot of gold at the end of the rainbow."

The staff confirmed an on call system was available to them out of office hours. Staff spoke highly of the support they received from the registered manager and members of the management team. One member of staff told us, "I feel my confidence has grown in this job. There is a lot of support."

People and their relatives confirmed there was good communication from the agency. One person said, "They're open and transparent from my point of view. I haven't had a problem, or if I did they dealt with it."

The provider employed a member of staff to monitor the quality of support people received; they visited people on a regular basis to check they were happy with the support they received and monitor staff practice. Observations of care looked at staff dress, attitude, time keeping and the support they provided. Measures were in place to gather people's views and experiences in relation to the care they received. We looked at quality surveys that had been completed and returned in July 2017. People had provided positive feedback.

Staff were encouraged to share their views through staff surveys and staff had confirmed they were happy with the support they received from the management team. Team meetings were held and minutes were taken for staff that were unable to attend. An annual training plan was in place and was discussed in staff supervision. This demonstrated the provider involved the staff team in the running of the service and supported them in their professional development.

The management team regularly reviewed people's care to ensure their current needs were met and that they had sufficient staffing levels and care hours in place to meet their needs. Medicine records were returned to the office once completed to enable the management team to identify any errors and address these. We looked at recent medicine records and saw they had been completed correctly.

We saw the data management systems at the office base ensured only authorised persons had access to records. People's confidential records were kept securely so that only staff could access them. Staff records were kept securely and confidentially by the provider. The provider understood the responsibilities of their registration with us. They had reported significant information and events in accordance with the requirements of their registration.