

Plymouth Court Limited Plymouth Court Limited

Inspection report

Plymouth Close Headless Cross Redditch Worcestershire B97 4NR Date of inspection visit: 11 April 2016

Good

Date of publication: 17 May 2016

Tel: 01527404446

Ratings

Overall rating for this service

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

The inspection was announced and took place on 11 April 2016.

The provider is registered with us to provide personal care and support for people who live in their own bungalows within Plymouth Court. At the time of our inspection 4 people received care and support from this service.

A registered manager was 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 said that they felt safe at Plymouth Court and received support from staff who were kind, caring and respectful towards them. Staff understood how to protect people from abuse and were clear about the steps they would take if they suspected someone was unsafe.

People told us that the staff and management were approachable and if they had any concerns they would be listened to. People said that there were enough staff to meet their needs and they were supported to take their medicines when they needed them.

Staff said training helped them do their job and gave them the right skills to meet the needs of the people they supported. However we saw that some staff training was overdue for renewal to ensure staff were kept update with any new information.

People we spoke with were very positive about the care that they received. They told us staff were kind and caring and treated them with respect. Staff provided support that ensured people were treated with privacy and dignity. People were supported by staff to maintain their independence.

People told us that they were involved in the care and support that they received. People were given choice and their wishes respected by staff. Staff understood they could only care for and support people who consented to being cared for. People told us that staff were quick to respond when they were unwell and they were supported to access health professionals when needed.

People told us that staff helped them prepare meals or get meals from the onsite restaurant when needed. Staff ensured people were offered a choice of meals and drinks.

People and staff were confident of the actions they would take if they had concerns and that any concerns would be dealt with appropriately.

The management team ensured regular checks were completed to monitor the quality of the care that

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people received and action had been taken where areas were identified for improvement.

People were positive about the care and support they received and the service as a whole.

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 supported by staff who knew how to keep them safe from the risk abuse and harm.	
People were supported by sufficient numbers of staff to keep them safe and meet their needs.	
People were supported to take their medicines when they needed them.	
Is the service effective?	Good •
The service was effective.	
Staff were knowledgeable about people's support needs and sought consent before providing care.	
Staff supported people to maintain good health by accessing healthcare professionals and supporting them to maintain a healthy diet.	
Is the service caring?	Good •
The service was caring.	
People told us staff were very caring and they received care that met their needs. Staff provided care that took account of people's individual preferences and was respectful of their privacy and dignity.	
Is the service responsive?	Good •
The service was responsive.	
Staff were knowledgeable about people's care needs and their preferences in order to provide a personalised service.	
People knew how to raise any concerns and were confident that they would be listened to and acted upon.	

Is the service well-led?

The service was well led.

People and care staff were complimentary about the overall service. There was open communication within the staff team and the provider regularly checked the quality of the service provided.



Plymouth Court Limited

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.

The inspection took place on 11 April 2016 and was announced. The provider was given 48 hours' notice because the location provides a domiciliary care service and we needed to be sure that someone would be in the office. The inspection was carried out by one inspector.

The provider had completed a Provider Information Return (PIR). This form asks the provider to give some key information about the service, what the service does well and improvements they plan to make. We also reviewed information we held about the service and looked at the notifications they had sent us. A notification is information about important events which the provider is required to send us by law. We used this information to focus our inspection.

We spoke with two people who received support from the service and two relatives. We also spoke to the registered manager, a housekeeper and three housekeeping assistants. We looked at the care records of four people who received support from the service, three staff files, incident recordings, safeguarding records, policies and procedures and medication records.

Our findings

People we spoke with told us they felt safe when care staff were with them in their own homes. One relative told us, "They keep [relative's name] safe, I have no worries," and one person commented that they felt safe knowing staff were nearby and they could call them if needed.

Staff recognised the types of abuse people could be at risk from and told us they had received training in safeguarding. Staff were able to tell us what action they would take if they suspected someone was at risk of abuse. They said they would have no hesitation in reporting any concerns to the registered manager.

People were supported by staff who were aware of the risks to them on a daily basis. Staff we spoke with were clear about the help and assistance each person needed to support their safety. Staff told us that they looked to ensure the environment was kept safe and secure for people. For example, one member of staff told us they always checked there were no tripping hazards and ensured one person's walking aid was to hand before they left them.

People told us there was enough staff available to support them and they stayed for the required length of time. All people we spoke with told us they had the same staff who arrived on time, unless there were changes for holidays or sickness. They said that staff were reliable and this reassured them. One relative told us, "It's usually the same staff, if there's a change they let [relative's name] know, It's important to her to know who's coming."

Staff told us there was enough staff to meet people's needs. One member of staff said, "Most of us (staff) have been here a long time so we all work well together." The registered manager told us staff levels were based on the care needs of the people supported. They confirmed that if there was an increase in the amount of support needed then the staffing would be changed to respond to this.

We checked three staff files and saw records of the employment checks completed by the provider. All staff had now been employed at the home for a number of years, however reference checks with previous employers were inconsistent. The registered manager told us they were aware of the need to get written references and this would be completed for future staff appointments.

People were supported by staff to take their medicines. One person told us, "Medication is on time; they look after it all for me." A relative told us staff looked after their family member's medicines, they said they had, "Absolutely no concerns, it's all done brilliantly." Staff confirmed they had received medication training and were able to give us examples of the actions they had taken when someone refused their medicines. One member of staff told us, "I would try to encourage them and explain why the medicine was needed. If they still refused I would make a note of it and notify the office." Checks of the medication record sheets were made to ensure staff had correctly recorded the medicines they had given to people.

Is the service effective?

Our findings

All people we spoke with told us staff knew the care they needed. One person said, "Staff look after me, they know what they are doing." Another person told us, "Staff know how to look after me." A relative told us they felt staff were trained and they commented, "I'm confident they meet her needs."

Staff told us that training helped them to do their job gave examples of how training had impacted on the care they provided. One member of staff told us how safety training had made them look at the environment, "For tripping hazards like frayed carpets." We found that some staff training was overdue for renewal to ensure staff were kept update with any new information. The registered manager acknowledged this and told us they were in the process of prioritising and arranging the new training for staff.

Staff told us they did not have formal supervision but they could approach the registered manager or housekeepers at any time for support or advice. One member of staff said, "Working in the scheme means the housekeepers are always onsite for you to see and ask for advice if needed."

We checked whether the service was working within the principles of the Mental Capacity Act 2005 (MCA). The 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.

We spoke with staff who were clear that people had a choice when delivering personal care and support and were aware of their responsibilities to ensure people's consent to care and treatment was sought and recorded. This was confirmed by people we spoke with, one of whom commented, "Staff ask me if I am okay and what I want before they start."

Where people needed support with their decision making the registered manager told us of the actions that would be taken. For example, completion of a capacity assessment and speaking to the people who knew them well.

Some people were being supported by staff to eat and drink enough to keep them well. One person told us, "They (staff) give me a choice of drinks and do toast for my breakfast because that's what I like." Both people we spoke with told us staff supported them to access meals from the onsite restaurant each lunch time. One relative told us, "[Relative's name] dietary needs are met. I'm happy she is getting a cooked lunch every day."

Staff demonstrated that they knew when to contact outside assistance to support a person healthcare. One relative commented, "They (staff) called the GP when [relative's name] was unwell; they also let us know." Another relative told us when their family member suffered a fall; staff had called medical assistance and also stopped with their relative to ensure they were alright. The relative said, "When I arrived everything was calm and in hand."

Our findings

People spoke positively about both support they received and the staff that provided it. One person said about staff, "They are very caring. They are all good." A relative also commented, "Staff are caring, compassionate and very gentle." People told us that they were supported by staff who knew how to provide their care in the way they wanted it.

One person told us how they had a good relationship with the staff, they said, "I like them all." A relative said, "Staff are great, they are even prepared to stay over to make sure it's all done and [relative's name] is OK."

People told they received care from the same staff unless carers were away from work. One person told us, "It's mainly the same staff, sometimes different if staff on holiday bit it's not a problem as I know all the staff anyway." One relative told us they were reassured by the consistent staffing.

Staff spoke warmly about the people they supported and provided care for. One member of staff said, "They've all got their own stories to tell. They are all so young in attitude we have real fun." Another told us, "It's a lovely place to work with such lovely people." Staff we spoke with were able to detail people's needs and how they gave assurance when providing care. One member of staff said, "It's all about your approach."

During our conversations with staff, they were able to tell us about people's likes and dislikes. Staff we spoke with told us as they had worked there for a long period of time they were able to build up a good knowledge of people and their families. This was confirmed by one relative who said, "It works so well because we are a team."

Staff told us how they respected people as individuals and how they involved people in their day to day care and which promoted their independence. One member of staff said, "It's about respecting and encouraging people." Another member of staff said, "I encourage people, for example I leave the kettle ready so they can make themselves a drink after I leave." This was confirmed by people we spoke to, one person told us how staff helped them and added, "I like to do some things myself."

People we spoke with confirmed that they were treated with dignity and respect. One relative told us, "It's her home and her choices. Although she's been here a long time, all the staff call out and only go into her home invited." Another relative told us, "Respect is a given, it's there from the word go, for [relative's name] and her home as well." Staff advised how they respected people's homes. One member of staff told us, "I always make sure I leave everything nice and tidy."

People confirmed they were able to express their views on the care provided and felt listened to. In the PIR submitted prior to the inspection, the registered manager wrote, 'A supervising staff member reviews delivery of care with clients face-to-face on a weekly basis to ensure there are no problems/oversights'. This was confirmed by both people we spoke to, one of whom told us they could express their views whenever they chose as, "The housekeeper is always available and also visits once a week."

Is the service responsive?

Our findings

People told us staff involved them in their care and cared for them in the way they wanted. One person told us, "Staff know me and what I like." A relative told us they found the staff responsive, they said," They (staff) have accommodated [relative's name] as she became more dependent – everyday something changes."

Staff spoken with were able to describe in detail people's preferences and how they liked to be supported. One member of staff told us, "By working with people over a period of time you get to know them really well." Staff told us they felt the best way to know people's preference was to talk to them.

We looked at four people's care records which showed they had been updated when a change had been required. Staff we spoke with felt that records reflected current care needs. All care staff we spoke with knew each person well and understood the exact care and support they needed.

Staff were able to tell us about the level of support people required, for example people's health needs. We saw staff shared information as people's needs changed, so that people would continue to receive the right care. One relative told us, "[Relatives name] needed additional support, they (staff) have been so accommodating. They've done everything we've asked for." They went onto say, "Records are always written up to reflect changes."

Staff told us and we saw that information was recorded in a message book which the housekeepers could then use to brief staff at the start of a shift. For example, if a person had seen their GP because they were unwell. Staff said communication systems worked well and we saw for each person supported there was a daily communication record in place for staff to refer to.

The two relatives we spoke with both told us they felt communication was good. One relative said, "It's the right level of communication." Whilst the second relative told us, "They have kept us (the family) well informed."

People said they felt able to complain or raise issues should the situation arise, however people we spoke with told us they had no complaints and had not had to raise any issues since arriving at the service. One person said, "I have no complaints, If I wasn't happy I'd certainly let it be known and staff would help me." A relative commented, "I know I can raise issues. They listen to us." One relative told us although they had not raised a complaint they had raised an issue with the registered manager. They told us the matter was dealt with immediately and resolved to their satisfaction.

Staff told us they had not had reason to raise any concerns but felt they could approach the housekeepers or registered manager with any concerns if they needed to. One member of staff said, "I'd definitely take action, no problem with that."

There had been no written complaints over the previous twelve month period but the registered manager was clear of the actions they would take if a complaint was received including logging the complaint,

investigating, responding to the person and taking any learning for improvements.

Is the service well-led?

Our findings

All people and staff spoke positively about the service. One person said, 'I am very happy. I couldn't wish for anything better." A relative told us, "The care is good, it's an absolute blessing, there's nowhere I'd rather her be."

People told us they knew who the registered manager was and that they were approachable. We saw the registered manager chatting warmly with people and who were relaxed around them. For example, we saw one person smile and share a joke with them. One relative said, "The manager cares for relatives as well as the people."

Staff spoke positively of the management team and told us they felt listened to and supported. They told us they could go to housekeepers or registered manager for any advice any concerns or issues. One member of staff said, "There's always been a good response when I've asked for help."

All staff we spoke with told us they enjoyed working at the service and felt they demonstrated a caring approach to their role. One member of staff said, "It's a lovely place to work." The registered manager felt that all staff worked well as a team. Staff confirmed this and one member of staff said, "It's a good team." The registered manager told us they looked to recruit good staff, they said "Staff need to have the right qualities."

Staff told us that formal staff meetings were not held but as a small team they could address any issues in the office or memos were sent by the registered manager. One member of staff said if they have any issues to discuss they could always go straight to the registered manager. They said, "[Registered manager] always gives you time and advice. They speak plainly and will speak you through it."

People's confidential information was held securely. We saw that care plans were maintained and that incidents were logged and a record made of any actions taken. There were good systems in place and staff knew where information was kept and how to access it.

The provider ensured regular checks were completed to monitor the quality of care that people received and look at where improvements could be made. We saw that where actions were required these had been taken.

We found that although actions had been taken in response to incidents, not all relevant notifications had been submitted to CQC. A notification is information about important events which the provider is required to send us by law and CQC requires this information to look at the risks to people who use care services. The registered manager said this would be done following the inspection.

The registered manager told us they were supported by the provider. They advised they attended training with other managers and they received policies and procedures from the provider plus alerts on any updates in legislation.