Tamworth & District Day Centre Ltd

Nurses Cottage

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?	Requires Improvement

Summary of findings

Overall summary

We inspected this service on 25 January 2016. This was an announced inspection and we notified the provider two days before our inspection in order to arrange to meet with people who used the service. This was the first inspection of this service.

Nurses Cottage provides domiciliary care for people who live in their own home in Tamworth. At the time of our inspection, eight people were receiving personal care support from the provider.

There was a registered manager in the service. 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.

The provider had systems in place to assess and monitor the quality of care. People were encouraged to give their feedback and this was used to drive improvements. Quality audits within the registered office had not been carried out to ensure the premises was safe.

People felt safe when they received care and were confident that the staff knew how they wanted to be supported. Staff understood how to minimise the chance of harm occurring to people and risks assessments recorded any concerns. Staff understood how to recognise potential harm and protect people from abuse and knew how to report concerns. Recruitment checks were made to confirm staff were of good character to work with people and sufficient staff were available to meet people's support needs.

People had capacity to make decisions about their own care and their consent was sought before staff provided any care and support. People received staff support at a time they wanted it and were happy with how the staff supported and helped them to take their medicine as prescribed.

Staff knew people well and were able to tell us how they supported people. There was a small team of staff who had the skills to meet people's needs. The support was flexible and responsive to changes. People benefitted from having staff who had a good understanding of their individual challenges and supported them to retain their independence.

People were treated with care and kindness and their wellbeing was protected. People chose how support was delivered and they were involved in the review of their care. Staff listened to people's views and they knew how to make a complaint or raise concerns. Staff helped people to understand what was happening so that they were not anxious or uncomfortable.

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 felt safe when they received care. Risks to people had been assessed and there was information about action to be taken to minimise the chance of harm occurring to people and staff. There were sufficient staff available and recruitment procedures were in place to ensure people were suitable to work with people.

Is the service effective?

Good

The service was effective.

Staff sought people's consent when providing support and people were able to make decisions about their care. Staff knew people well and had completed training so they could provide the support people wanted. Where the agreed support included help at meal times, this was provided and food was prepared for people.

Is the service caring?

Good

The service was caring.

People and their relatives were positive about the way staff provided their care and support. The staff were kind and compassionate and provided support in a respectful and dignified way.

Is the service responsive?

Good

The service was responsive.

People were involved in the review of their care and decided how they wanted to be supported. People felt able to raise any concerns and staff responded to this to improve the support people received.

Is the service well-led?

Requires Improvement

The service was well-led.

Systems were in place to assess and monitor the quality of care to bring about improvements but the provider had not identified where they needed to carry out audits within the office environment as required. People were happy with the support they received and were asked how they could improve the support and service. Staff were supported in their role and felt able to comment on the quality of service and raise any concerns.

Nurses Cottage

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 inspection visit took place on 25 January 2016 and was announced and carried out by one inspector. The provider was given two days' notice because the location provides a domiciliary care service and we wanted to make sure we had an opportunity to speak with people and staff. The provider also operated a day care provision and people who used the service consented to speaking with us within that service.

On this occasion we did not ask the provider to send us 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. However we offered the provider the opportunity to share information they felt relevant with us.

We used a range of different methods to help us understand people's experience including visiting four people, three staff and the registered manager.

We looked at three people's care records to see if their records were accurate and up to date. We also looked at records relating to the management of the service including quality checks.

Good

Is the service safe?

Our findings

People told us they felt safe when they received care and were satisfied with the security arrangements for their home. Some people had an entry code so staff could access a key to enter their home. One person told us, "I change my code quite often but always let them know so they can get the key." Another person told us, "They shout hello when they come in so I know they are there." The staff confirmed they had access to this information and if the code change or they needed reminding, the manager was always available to give this information to them verbally. One member of staff told us, "We don't write it down, You have to be careful because we don't want other people to know it and leave people vulnerable."

People were protected from the risks of abuse because staff knew how to recognise the signs of abuse and knew what actions to take if they felt people were at risk. Staff were confident they would be taken seriously if they raised concerns with the registered manager and knew how to report concerns independently. There had been no safeguarding incidents within this service and one member of staff told us, "We are such a small close team that we notice everything. We talk every day with each other and if we saw anything that concerned us we would report it. It's often what people don't tell us too. If they try and hide a bruise, you have to ask yourself why?" Another person told us, "We have all the information in the office, so we can remind ourselves of where to go and who to speak with. We all care so much about people here and we wouldn't hesitate reporting something." A copy of the policy and procedure was available for staff to refer to in the office when needed.

Staff had a good knowledge of each person's identified risks and worked in ways that ensured that people were cared for safely. Staff demonstrated a clear understanding of their role in regard to this aspect of people's care. They told us the staff knew how to support them when walking and they had access to equipment to remain independent. One person told us, "I have my own wheelchair and frame and the staff make sure I can still get around when they aren't there. They always make sure I'm wearing my pendant so I can call for help if I needed too." Another person told us, "The staff are lovely and help me where I need this, but never interfere and stop me doing what I can do for myself."

We saw risks to people's safety had been assessed and staff knew how to provide support to reduce the risk of harm to people. Before offering a service, assessments of the person's home were carried out to identify any risks to staff when providing care. Staff were aware of the lone working policy in place to keep them safe and one member of staff told us, "We are never thrown in at the deep end. We get to meet people and learn about the support they want before we give any support." The provider also operated a day care provision and people who used the service also received day care. One member of staff told us, "This works really well as people get to know us and we get to know them whilst they are having day care. This means when we provide the support, they already know us."

People were prompted to take their medicines and told us they were happy with the support they received. One person told us, "I have two tablets in the morning and the staff always help me to take these. They never forget and always give me a drink of water." We saw staff completed a medication administration record after medicines had been given and recorded any concerns in the daily notes. One member of staff told us,

"We speak to each other between visits, so if people don't have their medicines for a reason, we can let the next member of staff know so they can have it later if that's agreed or we call the doctor if people aren't well." Where staff were unsure where people needed medicines or needed more information, the registered manager contacted the doctor to ensure they were being given as prescribed. We saw information about the support people needed with medicines was recorded in people's care records and matched what staff had told us.

When new staff started working in the service, the staff told us that that recruitment checks were in place to ensure they were suitable to work with people. We saw these checks included requesting and checking references of the staffs' characters and their suitability to work with the people who used the service. We spoke with one member of staff who had recently started working in the service. They told us the provider had taken out appropriate references and had confirmed their identity. Police checks had been carried out to ensure they were suitable to work with people.

There were sufficient staff to provide people with the agreed level of support. People told us that the staff were reliable and provided the agreed support. One person told us, "I don't think the staff have ever been more than five minutes late. They pretty much turn up on time and have never let me down." A member of staff explained that all support visits were covered within the small team of staff. One staff member told us, "We pride ourselves on knowing people and people being comfortable with us. If we need any extra cover we just sort it out amongst ourselves. This way we know people are getting the support they want." Staff were required to text the registered manager when they arrived and we saw the time staff arrived was monitored.

Good

Is the service effective?

Our findings

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, and whether any conditions on authorisations to deprive a person of their liberty were being met. The staff understood MCA and told us that all the people who used the service had capacity to make decisions about their daily care and support and were not subject to any restrictions. Some people had organised for a family member to manage their finances through a lasting power of attorney (LPA). A LPA is a way of giving someone people trust the legal authority to make decisions on their behalf, if they lack mental capacity at some time in the future or no longer wish to make decisions. The provider knew who had an LPA and what this meant for people to ensure that only people who were legally authorised to do so, made decisions when people lacked capacity.

People received effective care and support from staff who were well trained and knew how people liked things done. New staff received an induction into the service and this included training for the skills they would need. One person told us, "Wonderful. The staff know what they are doing and are lovely." We spoke with one new member of staff who told us, "Before we gave support to anyone we worked alongside experienced staff on at least three occasions so people got to know us. We also worked in the day care centre, so by the time we visited people on our own, we knew them really well." They told us they were confident they had the skills they needed to support people.

People benefitted from staff who were well supervised. Staff were observed carrying out care and support in people's home as part of the supervision and appraisal system. Staff confirmed this and one staff member told us, "We are watched providing care and we get feedback on this and talk about it so we know we are doing it right." Another member of staff told us, "We had to rate ourselves and how well we thought we were doing. Our manager did this too and I found I rated myself lower than the manager, so this gave me more confidence and we talked about how well I was doing."

The provider also managed a day service provision where food was prepared. If people requested a meal, staff at the day service would prepare and cook it for them; the meals were delivered by staff when providing support. Other people received staff support to cook food or prepare snacks to have later in the day. One person told us, "The food is lovely that they send to us. I've never had a bad meal." Another person told us, "If I want them to do anything for me, all I have to do is ask. I like to be independent but sometimes I ask for a snack for later and they do this."

People retained responsibility for managing their own health care and continued to be registered with their

GP. Where there were concerns about people's health including weight, this was monitored by staff. The provider had equipment to weigh people and where concerns were identified, the staff told us that people were supported to have further health care. One person told us, "The staff don't leave you if they are worried. If you want them to call the doctor they will." A member of staff told us, "We know that people can choose what they want but we can help them to get health care, especially where people do not have any other support. We have made referrals for people for health investigations and to get the equipment they need. People here are like part of the family and we do everything we can do to help."

Good

Is the service caring?

Our findings

People were treated with care and kindness and told us that staff treated them with dignity and respect. Staff were knowledgeable about the people they cared for, their needs and what they liked to do. One person told us, "Their decency is good; I still have my dignity and the staff are excellent." Another person told us, "I do most things myself and the staff know this and let me do as much as I can." The staff told us that they always made sure that people were comfortable and protected their dignity. One staff member told us, "We respect people and we need to make sure we provide care in the way people want this." All interactions we observed between staff and the people using the service were calm, caring and professional.

People told us the staff were friendly and one person told us, "They're lovely and they are not bossy. I'm grateful I can do so much for myself and the staff are very kind when they help." One member of staff told us, "Because there are so few of us, we've been able to get to know people really well and there's no awkwardness. That's so much better." Where staff supported people to speak with us we saw people were comfortable in their presence and spoke freely, sharing jokes and personal experiences. Staff knew how to support people to understand the inspection process and gave clear information about what was happening.

People said they were given choices in the support they had and staff always asked them what they needed. Staff told us that they asked people before they provided support and took account of their wishes. One staff member told us, "We make sure people have choices, and when people have made a choice then that's what we do." The care records we viewed detailed how support needed to be provided, were personalised to people's individual likes and dislikes and clearly stated what people wanted. We looked at the care records with two people and one person told us, "I have a copy in my home I can look at. The staff know what's in there and do what I want them to do." We saw during our discussions with people that staff enabled people to be responsible and to speak about what was important for them.

Staff spoke about people with compassion and respected their views. One member of staff told us, "We get to know people and their families so well and have such a good rapport. We listen to people and make sure everything is changed so people get what they want. We make any changes so things can be improved."

People were supported to be as independent as possible and staff knew how they wanted their support. One person told us, "The staff do so much more than they should. If they come and they see I need more help, then they stay and help me. They'd never leave me knowing that I needed more. They do so much and are so kind." Staff were aware of people's abilities and the care records highlighted what people were able to do for themselves and where they needed help. This ensured staff had the information they needed to maintain people's independence wherever possible.

Good

Is the service responsive?

Our findings

People received support that was individualised to their personal preferences and needs. The service was flexible and the provider was responsive to changes in people's needs. We saw the registered manager reviewed the care for one person after a hospital visit. The level of care, the support and frequency was reviewed to ensure the person could remain safe within their home. One member of staff told us, "We share all our knowledge and experience so when things change and people have new equipment, we can work together so we know what the changes are and what we need to do to help people."

People told us that staff provided their support at a time that had been agreed when they started using the service. The support was reviewed monthly to ensure they remained happy with the level and quality of the support provided. Where people wanted any changes, they told us the staff listened to them. One member of staff told us, "We listen to what people want and update the care plans. We all speak to each other every day so we can make sure other staff know about the changes." Staff knew people well and were able to tell us how they supported them. The care records were developed with the person and described in detail the support they needed. People's likes, dislikes and how they liked things done were explored and included into their care records. A copy was maintained in people's home and included information about how they wanted to be supported.

People were able to raise concerns or make a complaint if something was not right and they were confident their concerns would be taken seriously. One person told us, "I'd just tell them if something was wrong but I don't have anything to complain about." Another person told us, "I've had to complain about another service before and I would again. I feel very fortunate to have found this place. It's wonderful here and I'm so much happier." People had a copy of the service's policy which provided information on how to make a complaint. The provider had not received any formal complaints and senior staff were confident that all concerns would be addressed promptly.

Requires Improvement

Is the service well-led?

Our findings

The provider carried out quality checks on how the service was managed. Care records, medication, daily records and risk assessments were reviewed each month and any changes were recorded on the care plan and in daily records. However the audits carried out to ensure the registered office was safe had not been completed; electrical equipment and fire checks had not been completed and the provider had not identified this. The registered manager acknowledged this and made arrangements for these to be completed to ensure the premises were safe to use.

A system was in place to record whether people received their support on time. There had been no missed calls as staff sent a text to alert the registered manager that they had arrived. The registered manager told us "We are such a small team that I'm aware of where staff are. This is also about keeping staff safe and knowing they have got there safely as well as making sure people receive their support."

People were consulted about the quality of their care during the review of their support and during any observation of staff practice. We saw people were asked about the quality of the care and their support each month. The registered manager explained that due to the size of the service quality was reviewed on an individual basis and any areas where improvements were identified changes were made promptly. They told us, "We take any action straight away." We saw any changes were recorded in people's individual care records.

People benefitted from receiving a service from staff who worked in an open and friendly culture. Staff told us they got on well together and that management worked with them as a team. One member of staff told us, "We work well together here. We talk to each other all the time and meet each month with the manager. We are always swapping information and looking at what changes we can make to make improvements for people."

People were supported by a staff team that were happy in their work. Staff told us they enjoyed working for the service. One member of staff told us, "I am very proud to work here and get a lot of job satisfaction and everyone supports each other." The staff were confident they could take any concerns to the registered manager and would be taken seriously and that action would be taken where appropriate. Staff members told us the manager was accessible and approachable and dealt effectively with any concerns they raised. The staff also said they would feel confident about reporting any concerns or poor practice to their manager.

There had been no accidents or incidents but staff knew what they should do and the registered manager was aware of incidents that needed to be notified to us. People's care records were up to date, fully completed and kept confidential where required.