

K.R. Court Limited

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Inspection report

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Tel: 01604708014

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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

This unannounced inspection took place on the 17 March 2016. King Richard Court Limited provide a personal care service to people aged 55+ who live in their own apartment within a sheltered housing complex. At the time of our inspection the service was supporting seven people.

There was a registered manager in post at the time of our inspection. 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 had care plans that were personalised to their individual needs and wishes. Records contained detailed information to assist care workers to provide care and support in an individualised manner that respected each person's individual requirements and promoted treating people with dignity.

People told us that they felt cared for safely in their own home. Staff understood the need to protect people from harm and abuse and knew what action they should take if they had any concerns. Staff understood their role in caring for people with limited or no capacity under the Mental Capacity Act 2005.

Staffing levels ensured that people received the support they required safely and at the times they needed. The recruitment practice protected people from being cared for by staff that were unsuitable to work in their home.

People received care from staff that were kind and caring. Staff had the skills and knowledge to provide the care and support people needed and were supported by a management team which was receptive to ideas and committed to providing a high standard of care.

The registered manager was approachable and had systems in place to monitor the quality of the service provided. Staff and people were confident that issues would be addressed and that any concerns they had would be listened to.

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 told us that they felt safe in their home with the staff that cared for them and staff understood their responsibilities to ensure people were kept safe.

Risk assessments were in place and managed in a way which ensured people received safe support.

Safe recruitment practices were in place and staffing levels ensured that people's care and support needs were safely met.

There were systems in place to manage medicines in a safe way and people were supported to take their prescribed medicines.

Is the service effective?

Good ●

The service was effective.

People were actively involved in decisions about their care and support needs. Staff demonstrated their understanding of the Mental Capacity Act, 2005 (MCA).

People received personalised care and support. Staff received training to ensure they had the skills and knowledge to support people appropriately and in the way that they preferred.

People were supported to access relevant health and social care professionals to ensure they received the care and support they needed.

Is the service caring?

Good ●

The service was caring.

People were encouraged to make decisions about how their support was provided and their privacy and dignity was protected and promoted.

Staff had a good understanding of people's needs and

preferences.

Staff promoted peoples independence to ensure people were as involved and in control of their lives as possible.

Is the service responsive?

Good

The service was responsive.

People were listened to, their views were acknowledged and acted upon and care and support was delivered in the way that people chose and preferred.

Staff were flexible in the length of time given at each visit to meet the needs of people who used the service.

People using the service and their relatives knew how to raise a concern or make a complaint.

Is the service well-led?

Good

The service was well-led.

People and staff were confident in the management. They were supported and encouraged to provide feedback about the service and it was used to drive continuous improvement. There were effective systems in place to monitor the quality and safety of the service and actions completed in a timely manner.

The manager monitored the quality and culture of the service and strived to lead a service which supported people to live as independent a life as possible.

K.R. Court Limited

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 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.

This unannounced inspection took place on 17 March 2016 and was undertaken by one inspector.

Before the inspection, we asked the provider to complete 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. We reviewed the completed PIR and previous inspection reports before the inspection. We checked the information we held about the service including statutory notifications. A notification is information about important events which the provider is required to send us by law.

During the inspection we spoke with three people who used the service, three care staff, two deputy managers and the registered manager.

We reviewed the care records of three people who used the service and three staff recruitment files. We also reviewed records relating to the management and quality assurance of the service.

Is the service safe?

Our findings

People were supported by staff that knew how to recognise if people were at risk of harm and knew what action to take when people were at risk. One person told us "I feel very safe here; the staff are good, I feel safe with them." Staff told us that if they had any concerns they would report it straight away to the deputy manager or manager. Staff had confidence that management would take the appropriate action. We saw from staff records that all staff had received safeguarding training and undertook regular refresher training.

Peoples' individual plans of care contained risk assessments to reduce and manage the risks to people's safety; for example people had risk assessments around the management of their administration of eye drops which provided staff with instructions about how to safely administer eye drops to minimise the risk of infection. Individual plans of care were reviewed on a regular basis to ensure that risk assessments and care plans were updated regularly or as changes occurred.

Training records confirmed that all staff had received health and safety and First Aid training. Accidents and incidents were regularly reviewed to look for any incident trends and control measures were put in place to minimise the risks.

There were appropriate recruitment practices in place. This meant that people were safeguarded against the risk of being cared for by unsuitable staff because staff had been checked for any criminal convictions and satisfactory employment references had been obtained before they started to work at King Richard Court.

People told us that they felt there was a sufficient number of staff to meet their needs. One person told us "They are always on time and take their time to help me." The staff we spoke to said they felt there were enough staff and that they had the time to support the person with their personal care needs and if they needed more time they just contacted the manager on duty to let them know. We could see from the staff rota that the needs of people had been taken into account when planning the rota. A service was only provided if there were sufficient staff hours available to undertake the care required.

People's medicines were safely managed. Care plans and risk assessments were in place when people needed staff support to manage their medicines. Staff told us that they were trained in the administration of medicines and training records confirmed that this was updated on an annual basis. We observed that medicines were stored securely and that Medication Administration Record sheets had been correctly completed.

Is the service effective?

Our findings

People received care and support from staff that had the skills, knowledge and experience to carry out their roles and responsibilities effectively. People told us that they were confident in the staff and felt they were all well trained and understood their responsibilities. One person told us "They are all very good; they know what to do which makes me feel confident in them." We read comments from families that praised the quality of the service provided. One family said "The family are very pleased with the high standard of all the staff at King Richard Court; [name] is very happy."

New staff undertook a thorough induction programme which included training in manual handling, health and safety and fire evacuation. One new member of staff explained that for the first week they shadowed another more experienced member of staff and undertook various online training and then during their second week they worked alongside staff and were introduced to the people who they would support. Staff were encouraged to undertake more specialist training such as training in dementia care. One member of staff told us "If you want to progress the management are approachable and will look at training with you." Another member of staff spoke to us about putting the training into practice regarding dementia care and said "I try to use the knowledge I have to take the appropriate action."

Staff told us they felt well supported in their roles. All staff received regular supervision and on-going support. Each day staff were kept informed as to how people were and if there were any changes to their care needs. One member of staff told us "We don't have to wait for supervision if there are any problems we can always speak to the managers and things are sorted out." Staff records confirmed staff received supervision which provided feedback about their performance and identified further training they could benefit from.

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. We checked whether the service was working within the principles of the MCA and we saw that they were. Staff sought the consent of the individual to complete everyday tasks; they were aware if a person had been deemed to lack the capacity to give their consent the service would ensure that appropriate steps would be taken legally to identify someone to act in their best interests. At the time of our inspection all the people using the service were able to give their consent and were actively involved in their care plan.

People were encouraged to remain independent and prepare meals for themselves within their own home. However, if they chose to they could have meals prepared for them which they could have either in their home or in a communal dining area in the complex. As part of people's care plans information had been gathered about people's food preferences and any allergies they may have. The information was passed to the kitchen staff who kept a separate record for all people living in the complex. In addition a welfare check was undertaken each day which ensured that all people were well and action was taken if they were not.

People remained responsible for seeking any assistance with their healthcare needs but if staff were concerned about anyone's health they would contact their GP on their behalf. The staff would take the necessary action in an emergency. One person told us that when they had fallen in their apartment staff responded quickly and called an ambulance.

Is the service caring?

Our findings

People were supported by staff that were kind and caring and were willing to help people in any way they could. People told us how nice all the staff were and that they were always willing to help them. One person said "All the staff are lovely; they attend to your needs. I have never found any of them not good." Another person told us "They are all very nice, they really are. They take time to get to know you." We also read a comment from one family which said "Overall the service is good."

Care plans included people's preferences and choices about how they wanted their support to be given. People told us that staff took time to listen to them and respected their wishes. One person told us that they usually had the same member of staff each day which they liked but felt all the staff knew them well. A member of staff told us that the information in the care plans about people's life before they came to live at King Richard Court was really helpful to engage with people; for example one person had been a volunteer with the Women's Institute and the staff had been able to spend time and listen to them describing what they had done.

Staff spoke to us about how they maintained people's dignity; they described closing curtains and doors to ensure no one could see in and covered people up as much as possible to maintain their dignity at all times. People told us that they felt staff respected their dignity and privacy and never spoke to them about other people who used the service. We observed staff ringing people's door bells before they entered their apartment and wait for people to respond to allow them in. Throughout the inspection we saw staff smiling and chatting to people as they went about their daily duties. There was a warm, friendly atmosphere around the building.

The people receiving personal care were able to express their wishes and were involved with their care plans. People told us that nothing was too much trouble. One person said, "Everyone is always willing to help in any way they can." We spoke to the registered manager about what support was available should a person not be able to represent themselves or had no family to help them. The manager explained that if that situation did arise they would support the person to get an advocate. At the time of the inspection no one had needed the support of an advocate.

Is the service responsive?

Our findings

People and their families were involved with the planning of their care. The registered manager explained that they had a set number of hours to provide the personal care service. Management ensured they had sufficient resources to meet people's needs before people were accepted into the service.

People were given information about the extra care service as they moved into the complex so any requests for the service came directly from people to the registered manager. One of the managers would then meet with the person and their family, if they wished for their family to be involved, to discuss what the person needed. We saw that from that initial meeting a care plan was drawn up with the person which detailed the support they needed and when they needed it. The care plan was reviewed every six months or as and when people's needs changed. Daily records were kept and people confirmed with us that staff always read and completed the daily record to ensure everyone was kept up to date and informed of any changes. Staff told us that they would report any concerns or issues to the manager on duty and that they spoke daily with the managers so that everyone was kept up to date. We saw a daily communication book which managers and staff wrote in which ensured that as staff came on shift they were kept up to date with things.

We observed throughout the day that there was open communication between the staff and managers. If people needed more time with the staff the staff were able to stay as long as they were needed and the managers would ensure that other visits were covered. The registered manager explained that if a person's needs became more than they could provide they would support the person to find another care provider or seek further advice from the local health and social care professionals.

People and their families were given information about what to do if they had a complaint. People told us that they would speak to the manager or any of the staff if they had a complaint. However, the people we spoke to had nothing but praise for the care and support they received. We saw that there were appropriate policies and procedures in place for complaints to be managed and responded to and where a complaint had been raised, it had been responded to in a timely manner and appropriate action taken.

Is the service well-led?

Our findings

Everyone we spoke with was complimentary about the service and the management of it. People and staff told us communication was good and they had positive relationships with the management. One person told us "The manager is nice, she knows everyone." A member of staff told us "This is a lovely environment to work in; all the managers are willing to help you."

The people who lived at King Richard Court were encouraged and enabled to share their experiences of living there and the support they received through regular meetings. These meeting were attended by the registered manager and provider which ensured that if any issues or concerns were raised they could be dealt with promptly. The people (owners) were also represented on the Board of Directors which met quarterly. All issues about the service were discussed at the Board meetings which included the provider. This ensured that the provider was kept up to date with how the service was running and enabled them to look at any improvements needed to the service. The registered manager and provider met regularly and the provider spent time in the complex meeting people and making them self available should anyone have wished to speak to them.

In addition to regular meetings people were asked to complete a yearly questionnaire about the service they received. The registered manager and provider would review the responses and act on any feedback they had received. We saw no suggestions for improvement in relation to the personal care service.

The staff had regular team meetings and were able to share ideas and suggestions to how they may make the service better. Staff spoke positively about the work they did and it was evident that the ethos of the complex was to provide the care and support in an environment that you would wish your own relative to be in. A number of staff had worked at King Richard Court for a number of years. One member of staff commented "This is an amazing place to work in; everyone is so happy here." As we spoke to people and staff it was evident that people were very happy and comfortable.

King Richard Court strived to provide a service which was tailored made to support a person to live as independent, secure and fulfilled life as possible. The management were committed to providing well trained and motivated staff.

Records relating to the day-to-day management of the service were up-to-date and accurate. Care records accurately reflected the level of care received by people. Records relating to staff recruitment and training were fit for purpose. Training records showed that new staff had completed their induction and staff that had been employed for twelve months or more were scheduled to attend 'refresher' training. Staff were encouraged to gain further qualifications and specialised training was provided.

There were policies and procedures in place which covered all aspects relevant to operating a personal care service which included safeguarding and recruitment procedures. Staff had access to the policies and procedures whenever they were required and staff were expected to read and understand them as part of their role. The registered manager understood their requirement to submit appropriate notifications to the

CQC.