

Jewel Home Support Ltd

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Inspection report

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Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

About the service

Jewel Home Support is a domiciliary care agency providing personal care to people living in their own homes in the community. At the time of our inspection there were 126 people receiving a regulated activity from this service.

Not everyone who used the service received personal care. CQC only inspects where people receive personal care. This is help with tasks related to personal hygiene and eating. Where they do we also consider any wider social care provided.

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

Systems in place helped safeguard people from the risk of abuse. Assessments of risk and safety and supporting measures in place helped minimise risks. Staff managed people's medicines safely. Staff followed infection prevention and control guidance to minimise risks related to the spread of infection. Staffing levels were sufficient to meet people's needs and managers recruited staff safely. Staff followed an induction programme, and training was on-going throughout employment.

The registered manager responded to complaints appropriately and used these to improve care provision. The provider was open and honest, in dealing with concerns raised. We have made a recommendation about reviewing how staff respond to calls made to the office.

Care plans included information about support required in areas such as nutrition, mobility, and personal care to help inform care provision. Staff made appropriate referrals to other agencies and professionals when required.

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.

People told us their equality and diversity respected. People felt staff respected their privacy and dignity and took into account their views when agreeing on the support required. Staff identified people's communication needs and addressed these with appropriate actions.

The provider and registered manager followed governance systems which provided oversight and monitoring of the service. These governance systems and processes ensured the service provided to people was safe.

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 good (published 28 September 2018).

Why we inspected

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

For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Jewel Home Support Ltd. on our website at www.cqc.org.uk.

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 well-led?

Good ●

The service was well-led.

Details are in our well-led findings below.

Jewel Home Support Ltd

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 carried out by 1 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.

Service and service type

This service 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 we needed to be sure that the provider or registered manager would be in the office to support the inspection.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority and professionals who work with the service. 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 all this information to plan our inspection.

During the inspection

We spoke with the registered manager, the office manager, a director, and the nominated individual. The nominated individual is responsible for supervising the management of the service on behalf of the provider. We visited the providers training facility and observed training being delivered to newly recruited staff. We looked at 7 people's care records, risk assessments, medication administration records and associated documents. We looked at 6 staff personnel files including recruitment, supervision, and training records. We reviewed records relating to the management of the service, including a variety of policies and procedures, staff training information and governance information. We conducted telephone interviews with 8 people who used the service and their relatives. We received additional feedback from 12 members of care staff who were delivering care to people at the time of the inspection.

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 good. The rating for this key question has remained good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- Appropriate systems and processes were in place to help safeguard people from the risk of abuse. A system for logging and investigating any safeguarding concerns was in place.
- Staff had received training in safeguarding and were able to describe different signs of abuse and neglect and the action they would take if concerned.
- People spoke positively about the care staff provided. One person said, "I tend to have the same group of carers. They are both male and female which is fine. It didn't used to be so regular but now it's improved. They are very friendly, and they help me to get in and out of bed and get washed. They do ask if I'm happy with everything before they go, and I have no complaints." A relative told us, "The regular carers that come now are very good and they make sure that [person] doesn't fall which reduces [person's] anxiety and reassures [person]. We feel that [person] is safe because overall the carers know what to do because they are regular."

Assessing risk, safety monitoring and management

- People had risk assessments in place and any risks to people's safety were identified. Care plans contained explanations of the control measures for staff to follow to keep people safe. Risk assessments outlined measures to help reduce the likelihood of people being harmed.
- Staff assessed risks to people's health, safety, and wellbeing; relevant risks included those relating to moving and handling, medicines, and the home environment.
- The service had a system for recording and monitoring accidents and incidents.

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 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 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 Mental Capacity Act (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 found the service was working within the principles of the MCA and at the time of the inspection, no person being supported was subject to any deprivation of liberty. Staff had been trained in MCA.

Staffing and recruitment

- Staff were recruited to the service in a safe way and all staff had the necessary safety checks in place before starting work, including a criminal record check to confirm they were suitable to work with people. Disclosure and Barring Service (DBS) checks provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.
- Staff were required to complete a period induction, shadowing other staff, and getting to know people before starting to work alone.
- There were enough staff employed to meet people's assessed needs.

Using medicines safely

- Medicines were managed safely and there was an up to date policy and procedure in place.
- Staff completed appropriate training and had their competence assessed to ensure they administered medicines safely.
- Clear information about people's requirements with regard to medicines was identified in their care plans.

Preventing and controlling infection

- People were protected from the risk of infection. The provider had ensured there was sufficient stock of personal protective equipment (PPE) in place and staff testing kits which we saw in the office premises. Staff we spoke with understood the protocols for wearing PPE appropriately when supporting people, and when visiting the office premises.
- People and their relatives confirmed staff followed appropriate infection control measures, such as hand washing and wearing protective equipment when supporting people with personal care. One person said, "Staff have stopped wearing masks now, but they still have gloves and I'm happy with the hygiene side." A relative told us, "I think the level of hygiene is quite good and during the pandemic staff wore plenty of PPE. For the morning call, they have plenty of aprons and gloves and they all go in a bag in the bin when they finish with them."

Learning lessons when things go wrong

- The provider had a process in place to ensure lessons were learned from issues such as accidents, incidents, complaints, and safeguarding concerns. Related policies and procedures were in place and up to date.

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 good. The rating for this key question has remained good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people; Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- People's equality characteristics were identified and recorded. A person said, "I think the staff are all quite nice people and they do what they can to help me."
- Staff told us they had regular contact with the management team and found them to be supportive if assistance was required. One staff member told us, "The visions and values of Jewel Home Support are to deliver a service that meets the needs of the service users in the comfort of their own homes. If I feel I have any concerns I can raise them, and they will be dealt with."
- Relatives comments about management were mixed. Some relatives felt communication with the office staff and managers could be improved. One relative told us, "I'm not sure who the actual manager is, and I just tend to speak to whoever answers the phone generally. I do think the communication could be better between us and the office and between the office and the carers. The carers do write in a book about what they've done so there is a record kept." A second relative said, "The senior people are quite good at dealing with any issues. I once phoned the office about [issue], and straight away they responded. If there is any issue, I do feel they will deal with it."

We recommend the provider reviews the office system for answering and responding to contacts made from people and their relatives.

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; Continuous learning and improving care

- Managers fully understood their responsibilities around duty of candour which was underpinned by appropriate policies and procedures.
- Some complaints had been received about the timing of the visits to people or missed visits; the provider investigated these and provided a response, which was confirmed by a local authority professional.
- There were systems in place to identify and manage risks to the quality of the support provided.
- The provider had a series of audits in place to monitor, support, and highlight areas for improvement.
- Staff performance was monitored by managers who completed spot checks of the quality of care provided.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; Working in partnership with others

- There was evidence of joined-up work between the provider and other professionals.
- The provider worked well with other organisations to ensure people's needs were met. This included liaison with statutory health and social care bodies.
- The registered manager had the skills, knowledge, and experience to perform their role and an oversight of the services they managed. The registered manager was aware of their responsibilities to report significant events to CQC and other agencies; our records confirmed this.