

Mrs Julie McFarland

Jemcare

Inspection report

Main Road
Flimby
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17 June 2021
24 June 2021
08 July 2021

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09 November 2021

Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service well-led?

Requires Improvement ●

Summary of findings

Overall summary

About the service

Jemcare is a domiciliary care service providing personal care to people living with learning disabilities and/or autism, mental health needs, physical disabilities and older people, including those living with dementia. The service was supporting 151 people at the time of our inspection.

Not everyone who used the service received personal care. The Care Quality Commission (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.

We expect health and social care providers to guarantee autistic people and people with a learning disability the choices, dignity, independence and good access to local communities that most people take for granted. 'Right support, right care, right culture' is the statutory guidance which supports the CQC to make assessments and judgements about services providing support to people with a learning disability and/or autistic people.

The service was able to demonstrate how they were meeting the underpinning principles of 'Right support, right care, right culture'. People's care enabled them to have choice, control and independence, including where they chose to make unwise decisions. Care was person-centred and promoted dignity. The provider had an ethos of ensuring people using their service were included and empowered to live their lives as they chose.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk.

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

The provider did not always have effective systems in place for monitoring the quality of people's care and how the service was performing. Processes for submitting statutory notifications was not always consistent. We made a recommendation about the provider's quality assurance processes.

The provider was focused on delivering good outcomes for people. The service had a positive culture, where people were happy. Staff shared in their commitment to promoting people's quality of life and looked for opportunities to improve people's care.

People received safe care, supported by a consistent team of care staff, who knew their care needs. The provider's most recent survey from people that used the service showed they felt supported to be independent, positive about their care and safe during the COVID-19 pandemic.

Staff had a positive approach to risk management and used their knowledge of people to manage risks effectively. At times, this information was not reflected in people's care records and behaviour support plans were not always in place. We made a recommendation about positive behaviour support plans. When

accidents and incidents occurred, people were supported to be safe and lessons were learnt to improve practice.

Rating at last inspection

The last rating for this service was good (published 28 November 2017).

Why we inspected

We identified potential concern in relation to risk at the service based on our records. As a result, we undertook a focused inspection to review the key questions of safe and well-led only.

We reviewed the information we held about the service. No areas of concern were identified in the other key questions. We therefore did not inspect them. Ratings from previous comprehensive inspections for those key questions were used in calculating the overall rating at this inspection.

We found no evidence during this inspection that people were at risk of harm from this concern. Please see the safe and well-led sections of this full report.

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

Follow up

We will continue to monitor information we receive about the service until we return to visit as per our re-inspection programme. If we receive any concerning information we may inspect sooner.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

The service was safe.

Details are in our safe findings below.

Good ●

Is the service well-led?

The service was not always well-led.

Details are in our well-led findings below.

Requires Improvement ●

Jemcare

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 Care Act 2014.

Inspection team

The inspection was carried out by two inspectors and two Experts 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.

The service was run by a single provider in day to day control of the service. It was therefore not required to have a registered manager. This means the provider is legally responsible for how the service is run and for the quality and safety of the care provided.

Notice of inspection

We gave the service 24 hours' notice of the inspection because of COVID-19. We had to arrange safe working procedures for our inspection.

Inspection activity started on 17 June and ended on 08 July 2021. One inspector visited the office location on 17 June and 24 June 2021.

What we did before the inspection

We reviewed information we had received about the agency since the last inspection. We sought feedback from the local authority who work with the agency. The provider was not asked to complete a provider information return prior to this inspection. This is information we require providers to send us to give some key information about the service, what the service does well and improvements they plan to make. We took

this into account when we inspected the service and made the judgements in this report. We used all of this information to plan our inspection.

During the inspection

We spoke with eight people who use the service and nine of their relatives about their experience of the care provided. We spoke with 22 staff, including the provider, assistant managers, administrators, senior care workers and care workers.

We reviewed a range of records. This included thirteen people's care records and multiple medication records. We looked at two staff files in relation to their recruitment and supervision. A variety of records relating to the management of the service, including policies and procedures, training information and quality assurance documents were reviewed.

Is the service safe?

Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm.

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant people were safe and protected from avoidable harm.

Assessing risk, safety monitoring and management

- The provider had a positive, pro-active approach to managing risks.
- People were supported to make choices and take positive risks.
- Staff were knowledgeable about risks to people, including associated with their health conditions. They knew how to manage risks to keep people safe.
- We identified some areas where improved recording was needed, including when monitoring charts were in place for people's fluid intake. The provider advised they would review this.
- People that could present with behaviours that challenge the service were supported to stay safe by skilled, knowledgeable staff. However, positive behaviour support plans were not always in place to ensure people received consistent support with their behaviours.

We recommend the provider follows and implements best practice guidance on positive behaviour support planning.

Systems and processes to safeguard people from the risk of abuse

- People were safe and protected from avoidable harm and abuse. One person told us, "I do feel safe with the care staff mainly because I know them all well."
- Staff received training in safeguarding and followed the provider's processes when they identified safeguarding concerns.
- The provider was aware of their responsibility to liaise with the local authority if safeguarding concerns were raised. The provider did not have a system in place to support the monitoring of safeguarding concerns and advised they would review this.

Staffing and recruitment

- People received support from a consistent team of staff, who were familiar with them and their care needs. One person said, "On occasion, but not very often, I have somebody new, but even that care worker is familiar with my needs."
- Care staff were recruited safely. Appropriate checks were carried out to protect people against unsuitable staff.
- Staff received training to enable them to undertake their care responsibilities safely.

Using medicines safely

- People received safe support to manage their medicines.
- Care staff followed appropriate procedures and worked with health professionals to administer medicines

to people who may lack capacity to make decisions about their medicines.

- The provider carried out medicine competencies to ensure staff were skilled at administering medicines safely.

Preventing and controlling infection

- Care workers had completed Infection Prevention and Control training (IPC) and had access to PPE, including masks, face shields, aprons and gloves. They knew how to use these to reduce the risk of people acquiring healthcare related infections.
- The provider carried out spot checks to check staff were following IPC best practice.

Learning lessons when things go wrong

- Systems were in place to record and report any accidents and incidents and ensure appropriate action was taken to support people's safety. One relative told us, "[Family member] had a fall and the care staff called the paramedics then they phoned me and stayed with [family member] throughout."
- The provider investigated when incidents occurred and learnt from these to improve practice.

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 the last inspection this key question was rated as good. At this inspection this key question is now requires improvement. This meant that some aspects of service management and leadership were inconsistent.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; Continuous learning and improving care

- The provider did not always have clear quality assurance systems in place to monitor the service. For example, they did not have a system to track any safeguarding concerns raised about people that used the service or a system for overseeing trends and themes at an organisational level. The provider advised they would review and improve their systems.
- The provider did not have a robust system in place to support them to identify when notifications were needed and when they had been raised. We discussed this with the provider who gave us assurance that improvements would be made. Following the inspection, we saw that processes had been reviewed.
- It was not always clear how the provider reviewed quality assurance checks and identified any changes needed to the service.

We recommend the provider reviews their quality assurance systems to consistently support improvement and monitoring.

- Staff understood their roles and responsibilities. A clear structure was in place to support effective communication, allocation of work and accountability.
- Staff teams constantly evaluated people's care and looked for ways to improve it.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

- The provider was focused on delivering good outcomes for people. Staff shared this commitment and wanted to ensure people had a high quality of life. One senior care worker said, "I love my job, I love everything about it, being on the road and seeing the people I support smile."
- People and their relatives spoke positively about the approach by care staff. One relative told us, "It feels very good to know [person] is loved by care staff and well looked after, I worry far less now."
- Equality and diversity were promoted to ensure people received care that took account of their cultural needs.

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

- People, relatives and staff told us the service had an open, positive culture. The provider understood their responsibility to be open, honest and apologise if things went wrong.

- People spoke highly of the staff team and their commitment to the service. One person said, "I am very positive about the agency, the staff are very good. [Assistant manager] phones up to check how things are going."

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- Feedback from people, relatives and staff was requested and used to develop the service.
- Local teams were in place to facilitate good working relationships with people that used the service and staff. People and staff spoke positively about these.
- Staff understood people's communication needs and how best to engage them in their care. One relative said, "I would say that they do have a good knowledge of dementia, they follow all the recommendations."
- Staff were involved in the development of the service. This included following the provider's decision to expand the service into surrounding areas. The provider had given careful consideration to ensuring people received consistently high-quality care.

Working in partnership with others

- People received joined up care. The provider worked effectively in partnership with a range of health and social care professionals. For example, ensuring staff received any specialist training prior to people's care starting.
- Staff were proactive at seeking advice from professionals and reviews of people's care when needed.