

JK Staffing Limited

JK Staffing Main Office

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?	Good ●

Summary of findings

Overall summary

About the service

JK Staffing Main Office is a domiciliary care service, providing personal care to people living in Manchester.

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. One the day of inspection, two people were receiving the regulated activity of personal care.

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

People received an assessment of their needs and preferences and were supported by staff who knew them well. Staff received an induction, training, shadowing and supervisions.

Support was provided to ensure people had enough to eat and drink. Proactive steps were taken to ensure people could access healthcare support. Staff understood how to give people choices and seek consent.

People were supported by a small team of staff that knew how to keep them safe and protect them from avoidable harm.

Medicines were not being administered to anyone at the time of inspection. However, the service had systems in place in order to support people if they needed it with their medicines.

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.

The registered manager promoted a positive culture and person-centred service. Staff knew their job roles and responsibilities. There were quality assurance systems in place, but due to the small number of care packages this system had not yet been tried and tested.

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

Rating at last inspection

This service was registered with us on 23 October 2020 and this is the first inspection.

Why we inspected

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

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?

The service was safe.

Details are in our safe findings below.

Good ●

Is the service effective?

The service was effective.

Details are in our effective findings below.

Good ●

Is the service caring?

The service was caring.

Details are in our caring findings below.

Good ●

Is the service responsive?

The service was responsive.

Details are in our responsive findings below.

Good ●

Is the service well-led?

The service was well-led.

Details are in our well-led findings below.

Good ●

JK Staffing Main Office

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

This inspection was carried out by one inspector.

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 service is required to have a registered manager. A registered manager is a person who has registered with the Care Quality Commission to manage the service. This means that they and the provider are legally responsible for how the service is run and for the quality and safety of the care provided.

At the time of our inspection there was a registered manager in post.

Notice of inspection

We gave a short period notice of the inspection. This was because it is a small service and we needed to be sure that the provider or registered manager would be in the office to support the inspection.

Inspection activity started on 23 June 2022 and ended on 29 June 2022. We visited the location's office on 23 June 2022.

What we did before the inspection

We reviewed information we had received about the service. We used information gathered as part of monitoring activity to help plan the inspection and inform our judgements. 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 two people's relatives who used the service about their experience of the care provided. We spoke with four members of staff including the registered manager, training coordinator, and two care workers. We reviewed a range of records. This included two people's care records, one staff file, and a range of policies, procedures and audits.

Is the service safe?

Our findings

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

This is the first inspection of this newly registered service. This key question has been rated good. This meant people were safe and protected from avoidable harm.

Staffing and recruitment

- There was enough staff to meet people's needs. There were no concerns relating to missed or late missed calls reported.
- Relatives spoke highly of the care staff. They told us they arrived when expected or would telephone if delayed by traffic. One relative told us, "The care staff are very reliable. We are very lucky to have such a good service."
- The provider had carried out recruitment checks, such as reviewing identification and completing Disclosure and Barring Service (DBS) checks. DBS checks provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.

Systems and processes to safeguard people from the risk of abuse

- People were protected from the risk of abuse. The service had effective safeguarding systems in place and staff had a good understanding of what to do to make sure people were protected from harm.
- A safeguarding policy was in place at the service, and staff received training in this area.
- Staff felt confident the registered manager would take action if they raised any concerns about people's safety and wellbeing and knew how to escalate issues to the local authority or the CQC.
- No safeguarding's had been raised about the service since being established in October 2020.

Assessing risk, safety monitoring and management; Learning lessons when things go wrong

- Risk assessments were carried out for people in a range of areas, such as mobility, continence and the home environment.
- Systems and processes were in place to safely manage any accidents and incidents at the service. However, these systems had not yet been tested due to the service providing care to just two people.

Using medicines safely

- No one was receiving support with medicines, however, systems were in place to ensure people could receive their medicines safely, if required.

Preventing and controlling infection

- Staff followed good infection control practice, including the use of personal protective equipment (PPE), and the management of COVID-19.
- One person's relative said, "The staff are always fully prepared wearing the correct PPE."

Is the service effective?

Our findings

Effective – this means we looked for evidence that people's care, treatment and support achieved good outcomes and promoted a good quality of life, based on best available evidence.

This is the first inspection for this newly registered service. This key question has been rated good. This meant people's outcomes were consistently good, and people's feedback confirmed this.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law

- People received an assessment of their needs and background when they joined the service. This included information on their medical history, preferences and choices, equality and diversity characteristics and religious beliefs.
- People were supported by a small group of care workers who knew their needs well, promoting good outcomes. One care worker said, "I love my jobs, we just need more work."

Staff support: induction, training, skills and experience

- People received care from a small team of staff that were well supported.
- Staff completed ongoing training and received one to one meetings to support and guide them with their work. Training courses included specific training to meet people's individual needs. The provider had identified some training gaps and staff were working towards completing all of their eLearning.
- Staff received an induction and ongoing training and support. This included mandatory training and completion of the care certificate. The Care Certificate is an agreed set of standards that define the knowledge, skills and behaviours expected of specific job roles in the health and social care sectors.

Supporting people to eat and drink enough to maintain a balanced diet

- People were supported to eat and drink and made choices about their diet.
- Risks associated with people's eating and drinking were assessed. Guidance on how to manage identified risks was recorded in care plans for staff to follow.
- One person's relative told us, "The staff are very friendly and will help with meals when we need support for [person's name]."

Supporting people to live healthier lives, access healthcare services and support; Staff working with other agencies to provide consistent, effective, timely care

- Not everyone received support with meals and drinks. Where they did, their relative told us they were happy with how this care was provided.
- The service also worked with other health and social care professionals, including district nurses and occupational therapists.

Ensuring consent to care and treatment in line with law and guidance

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 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 checked whether the service was working within the principles of the MCA.

- People's mental capacity had been considered in line with guidance for relevant decision-making processes. Staff had completed training in relation to the MCA.
- Care plans involved people and recorded where their consent had been discussed with them.
- Staff were aware of the principles of the mental capacity act and said they always considered people's choices.

Is the service caring?

Our findings

Caring – this means we looked for evidence that the service involved people and treated them with compassion, kindness, dignity and respect.

This is the first inspection for this newly registered service. This key question has been rated good.

This meant people were supported and treated with dignity and respect; and involved as partners in their care.

Ensuring people are well treated and supported; respecting equality and diversity

- Staff consistently treated people with kindness, empathy and respect, and this was reflected in records and in the feedback we received.
- People's relatives described an extremely caring and compassionate service. For example, one person's relative told us, "As a family we have been badly let down by other care agencies, but JK Staffing I believe is the best so far."
- Staff were attentive to what was important to people and supported people late at night as this was their preference.
- Staff respected people's diversity. One staff member told us about one person they visited, "I always respect people's wishes and I believe I have a lot in common with the [person's name] I care for, we are from a similar culture."

Supporting people to express their views and be involved in making decisions about their care

- People were asked for their feedback, which was recorded and acted upon.
- Staff actively built rapport and relationships of trust with people, to better understand their wishes and preferences and how to meet them. One care worker said, "We're a small care team and know our clients very well."

Respecting and promoting people's privacy, dignity and independence

- Staff could explain how they upheld people's privacy and dignity when supporting with personal care. One care worker said, "People's privacy is very important and I always make sure the person feels comfortable before I support with their personal care."
- People's relatives told us they were treated with dignity and respect and staff told us they ensured people's privacy was protected and confidentiality maintained.
- Systems were in place to ensure staff had the time to provide unhurried, person-centred care such as ensuring rotas were accurate and providing sufficient travelling time between visits.

Is the service responsive?

Our findings

Responsive – this means we looked for evidence that the service met people's needs.

This is the first inspection for this newly registered service. This key question has been rated good. This meant people's needs were met through good organisation and delivery.

Planning personalised care to ensure people have choice and control and to meet their needs and preferences

- People's support plans were personalised and reflected how they wanted their care and support to be provided.
- People's support plans were reviewed regularly and updated to ensure they reflected people's current needs.
- Relatives told us their family members had choice and control. One relative told us, "I have had a couple of chats with [registered managers name] about [person's name] care plan, to make sure the paperwork is correct."

Meeting people's communication needs

Since 2016 all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard. The Accessible Information Standard tells organisations what they have to do to help ensure people with a disability or sensory loss, and in some circumstances, their carers, get information in a way they can understand it. It also says that people should get the support they need in relation to communication.

- The registered manager and staff understood about the AIS. People's communication needs were identified and recorded in their care plans.
- Information on people's specific communication needs was gathered by the provider at the pre-assessment stage, to ensure this could be met.

Improving care quality in response to complaints or concerns

- The service had a complaints procedure. The procedure gave details of the process for reporting complaints. There had been no complaints raised at the time of the inspection.

End of life care and support

- People were not receiving end of life care at the time of our inspection. The registered manager explained how they would work with a person's family and healthcare professionals to review their care to meet the person's needs and understand their wishes.

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.

This is the first inspection for this newly registered service. This key question has been rated good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

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

- The registered manager monitored quality performance of the service and staff practice. This was done through spot checks and telephone monitoring. The registered manager confirmed they would look to expand their auditing tools once the service progressed and took on more packages of support.
- The registered manager was also a qualified nurse and shared their expertise with the staff employed. The registered manager would also often deliver support to people, which meant they were on hand to directly review the quality of care being delivered.
- During the inspection the registered manager informed us they were in the process of looking at electronic systems in order to make the service more efficient, but would ensure the staff were fully trained on this system before this was introduced.
- There was evidence of learning and improving care. The registered manager was keen to implement further auditing systems.

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

- There was a positive culture evident within the staff team, supported by management. The registered manager told us, "I'm very passionate about this service, I just want us to grow."
- People's relatives told us they were happy with the service and would recommend it to others. One person's relative said, "Very reliable agency. I cannot fault them."
- The registered manager understood their responsibilities under the duty of candour to be open and transparent when things go wrong, and to share lessons learned to improve the service.
- Staff were encouraged to raise any queries or concerns with the management team. The registered manager told us, "The staff know they can call me anytime."
- This was reflected in staff feedback. One care worker said, "[Registered manager's name] does their best for us, we are a small service, but I am sure we will grow."

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Working in partnership with others

- People and their relatives were encouraged to provide the feedback about the quality of service they received through regular meetings, telephone calls, and quality assurance checks.
- The registered manager responded by making the necessary changes which ensured people received

support and care adapted to their individual needs.

- Where required, the service communicated and worked in partnership with external parties.