

JACS Care Consultancy Ltd

JACS Care Offices

Inspection report

64 Church Way
South Croydon
Surrey
CR2 0JR

Date of inspection visit:
31 May 2022
01 June 2022

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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

JACS Care Office provides personal care support to people in their own home. At the time of our inspection one person was receiving support. 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

People received safe, considerate and high-quality care. Relatives were complimentary about the staff and the relationships they had built with their family members. One relative told us, "The care is invaluable." They also said staff were friendly, polite and provided care in line with their family members wishes and preferences. People and their relatives felt informed and involved in their care. Staff turned up on time and stayed the required length of time.

Staff kept up to date with government guidance around infection prevention and control practices and staff wore personal protective equipment (PPE) when supporting people. 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 were supported by staff that were kind, caring and took an interest in people's lives. Staff spent time speaking with people and understood what was important to people. People were supported by staff to make their own decisions about their care and support. Staff spoke positively about people and about spending time in people's company. Staff encouraged people to be as independent as possible.

The registered manager was aware of their requirements in line with their CQC registration. They had processes in place to monitor and improve the quality of service delivery, and regularly liaised with the person, relatives and staff to obtain their views and experiences of service delivery. The registered manager attended the local authority's provider forum to enable them to stay up to date with best practice guidance.

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 8 June 2017 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.

This was an 'inspection using remote technology'. This means we did not visit the office location and instead used technology such as electronic file sharing to gather information, and video and phone calls to engage with people using the service as part of this performance review and assessment.

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 effective?

Good ●

The service was effective.

Details are in our effective findings below.

Is the service caring?

Good ●

The service was caring.

Details are in our caring findings below.

Is the service responsive?

Good ●

The service was responsive.

Details are in our responsive findings below.

Is the service well-led?

Good ●

The service was well-led.

Details are in our well-Led findings below.

JACS Care Offices

Detailed findings

Background to this inspection

The inspection

We carried out this performance review and assessment under Section 46 of the Health and Social Care Act 2008 (the Act). We checked whether the provider was meeting the legal requirements of the regulations associated with the Act and looked at the quality of the service to provide a rating.

Unlike our standard approach to assessing performance, we did not physically visit the office of the location. This is a new approach we have introduced to reviewing and assessing performance of some care at home providers. Instead of visiting the office location we use technology such as electronic file sharing and video or phone calls to engage with people using the service and staff.

Inspection team

This inspection was undertaken 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

In line with our new approach we gave short period notice of this inspection and explained what was involved under the new methodology.

Inspection activity took place on 31 May 2022, 1 June 2022 and 15 June 2022.

What we did before the inspection

We looked at all the information we held about the provider, which included information they provided us when they were registered. On this occasion, the provider was not asked to complete a Provider Information Return (PIR) prior to this inspection. A PIR is information providers send us to give some key information about the service, what the service does well and improvements they plan to make. We used all this information to plan our inspection.

During the inspection

This performance review and assessment was carried out without a visit to the location's office. We used technology such as video calls to enable us to engage with people using the service and staff, and electronic file sharing to enable us to review documentation.

We spoke with one person's relative, two care workers and the registered manager. We reviewed records relating to the care provided, staffing and the management of the service.

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.

Systems and processes to safeguard people from the risk of abuse

- People were protected from the risk of abuse. Whilst there had not been any safeguarding concerns raised, staff were aware of how to recognise signs of abuse and how to report any concerns should they arise. One staff member told us, "Safeguarding can be neglect, emotional or financial abuse."
- Relatives told us that they felt safe with the care and support provided. One relative commented, "100% they are safe."
- Staff had received training on safeguarding adults and were expected to complete regular refresher training to ensure their knowledge was up to date with current best practice.
- The registered manager recognised the importance of supporting staff to further develop their knowledge and understanding around safeguarding adults. The registered manager had organised for staff to attend safeguarding meetings with the Local Authority as a forum to further enhance and develop staff's knowledge and understanding of the subject. The registered manager told us, "I wanted staff to broaden their understanding and if their knowledge is expanded, they will be better equipped at recognising any safeguarding concerns that may arise."

Assessing risk, safety monitoring and management

- Regular risk assessments were undertaken, and management plans were in place to minimise any risks to people's health and welfare. However, these lacked detail regarding fire safety. For example, whether the individual had smoke alarms in the property. The registered manager explained that the local fire service had recently visited the individual's property to monitor and check for fire safety and no concerns were found. The registered manager identified that the individual's risk assessment required further detail regarding fire safety, and this was actioned during the inspection.
- Staff were knowledgeable about the risks to people's safety and how to support them.
- Staff recognised the importance of leaving a person's home safe and secure following a care call.

Staffing and recruitment

- There were sufficient staff to provide people with the level of support they required. The person's relative told us there was a team of regular staff who came to support their family member. They turned up on time and stayed the allocated length of time.
- The provider had safe recruitment processes in place.
- Recruitment records showed staff had been recruited safely to ensure they were of good character to support people in the community. This included Disclosure and Barring Service (DBS) checks. DBS provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.

Using medicines safely

- At the time of our inspection staff were not administering any medicines.

Preventing and controlling infection

- There were systems to help prevent and control infection. These included policies, procedures and training for staff.
- People using the service and their relatives told us staff wore personal protective equipment (PPE) such as gloves and masks, and had good hygiene practices, such as hand washing. Staff told us they had enough PPE. Relatives praised the management of infection control. One relative told us, "They have been very professional regarding infection control and COVID-19."
- The management team carried out checks which included observations to help make sure staff were following infection prevention and control procedures.
- Policies and procedures included updates regarding COVID-19 and information about this was shared with staff. The provider also made sure staff were following government guidance regarding COVID-19 testing.

Learning lessons when things go wrong

- An incident reporting process was in place and staff knew how to report and record any concerns.

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

- Prior to people receiving a service the registered manager met with the person and their relatives to assess their needs and identify the level of support they required. Needs assessments were undertaken in line with national good practice guidance.

Staff support: induction, training, skills and experience

- Relatives told us staff had the required knowledge, skills and experience for their role. Their feedback included, "The staff are skilled and competent."
- A training programme was in place and staff were up to date with the provider's required training courses to ensure their knowledge and skills were up to date with best practice.
- The registered manager recognised the importance of a skilled and competent staff team. Practice, learning and development sessions had been set up with staff as a forum to further enhance and develop staff skill and understanding. The registered manager also held training supervisions with staff to ensure training was embedded into practice.
- Staff felt supported and valued within their role. One staff member told us, "The training is really good, and the manager sends us care articles which she thinks we might be interested in."

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

- Staff provided light meals and refreshments that people enjoyed and liked.

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

- Staff liaised with medical professionals involved in people's care if they needed any advice or guidance, or if they were concerned about a person's health.

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.

- The registered manager followed the MCA process during the initial assessment and ongoing to ensure people were able to make decisions about their health and welfare. Staff received training in the MCA. None of the people being supported at the time of this inspection lacked capacity to make decisions.
- Staff understood their responsibilities in relation to the MCA.

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

- One relative told us they felt their family member was treated well and that staff went above and beyond when caring for them. They commented, "It's a personalised service and the staff always go the extra mile."
- Staff were aware of people's religious and cultural needs and provided support in line with what people needed and wanted.
- Staff had spent time getting to know people and how best to support them. One staff member told us, "Getting to know the person is the best part of the job. They have a great sense of humour."

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

- A relative told us that they felt involved in their loved one's care. They commented, "I am thoroughly involved. The manager contacts me on a regular basis. I cannot fault communication."

Respecting and promoting people's privacy, dignity and independence

- Staff respected people's privacy and dignity, particularly when supporting them with personal care.
- Staff also supported people to maintain their independence. A relative told us, "They give her the autonomy and independence to remain living at home."

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 care plans included detailed information on what was required at each care call. Information was recorded on what was important to the individual during the care call and how the staff member could best support them.
- People received care that met their needs. One relative told us, "The care is faultless. I cannot praise them enough."

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.

- Staff were aware of how people communicated. Staff were also aware if people required communication aids, such as glasses.
- Whilst staff understood people's communication needs, care plans lacked detail on individual's communication. For example, whether the person wore glasses or required large print. We discussed this with the registered manager who took action during the inspection to amend and update care plans with the required information.

Improving care quality in response to complaints or concerns

- No complaints had been received since the service started operating. Nevertheless, relatives knew how to make a complaint and felt should they need to make a complaint that these would be listened to and dealt with.

End of life care and support

- At the time of our inspection the service was not supporting anyone who required end of life support.

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.

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

- Relatives and staff spoke highly of the registered manager. One staff member told us, "The manager is so supportive. They genuinely care for people and staff." Another staff member added, "They regularly call me to check I am ok and ask for my feedback."
- Relatives spoke highly of communication within the service. One relative commented, "The manager is in regular contact and always asks for feedback."
- Staff told us they also felt listened to and felt they could express their views and opinions, should they feel that any changes were needed. These were acknowledged and acted upon.

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: Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements

- The registered manager was aware of their CQC registration requirements, including the requirement to submit statutory notifications about key events should they occur.
- The registered manager was aware of the duty of candour and the importance of being open and honest should mistakes be made.
- There were systems in place to monitor the quality of service delivery. Whilst the agency was quite small these systems were being undertaken manually by the registered manager, including calling staff to confirm that they arrived for the care call and calling people after their care call to ensure they were happy with the care worker and how their care was delivered. In addition, spot checks were undertaken, and the registered manager shadowed care calls to ensure people's care needs were met and they were treated with dignity and respect.

Continuous learning and improving care: Working in partnership with others

- The registered manager told us they were committed to continuously learn and improve the business. They commented, "My main focus and vision is that quality of care is the priority."
- Various support systems had been implemented to help staff's knowledge and understanding. These included practice, learning and development sessions. The registered manager also sent staff articles on key changes in social care.
- The registered manager attended the local authority's support forum for managers of care at home services for peer support and continuous learning.

