

## JPM Community Care Services Housing Support Service

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DG11 2EF

Telephone: 01576 205641

Type of inspection: Unannounced  
Inspection completed on: 17 January 2018

**Service provided by:**  
JPM Community Care Services Ltd

**Service provider number:**  
SP2004005441

**Care service number:**  
CS2004073512

## About the service

This service registered with the Care Inspectorate on 1 April 2011.

JPM Community Care Services is a combined care at home and housing support service provided by JPM Community Care Services Ltd. The service provides care and support to older people living in Dumfries, Annan, Lockerbie, Gretna, Ecclefechan and the surrounding villages.

The stated aims of the service are:

"To ensure that the service provided should have a positive influence on the service user and that service user rights are promoted at all times.

To provide a service based on the principles underpinning the national care standards.

To constantly help staff develop their skills and abilities to meet the varied needs of service users."

Care staff are supported by three senior staff and a management team including:

Assistant director, service manager and quality assurance.

During the inspection the service was supporting 81 service users between the ages of 61 years old and 96 years old.

## What people told us

During the inspection we received the views of 19 service users and 5 relatives who were mostly extremely happy with the quality of care they received from the service.

Service users received support at times allocated and found staff to be reliable and punctual.

Service users and relatives praised the staff highly. They had lots of very good relationships with their carers and appreciated the 'little things' they attended to during their support.

Staff promoted dignity and respect when supporting individuals to attend to their care needs and were respectful of their needs and wishes and privacy.

Service users and relatives were very happy to be highly involved in all aspects of the care planning process which was regularly reviewed and evaluated with their input.

We received the following comments:

"My priority is that my relative is treated with dignity and care staff do this, they are a god send."

"I asked for a mix of carers as I like to see different faces, and I got them."

"I give all the girls top marks they are excellent."

"The girls are great I don't worry when they are here. They let me take my time and do things my way"

"I give all the carers top marks. I am confident they will always come to carry out my support."

"I'm very happy with the care its excellent. Staff all attend to the little extras which I can't always manage, things like taking down my Christmas cards."

"Support is reliable. The girls are always here and arrive on time."

"I am very particular about how I like things done. Staff are respectful and do as would like."

## Self assessment

The service had not been asked to complete a self-assessment in advance of the inspection. We looked at their improvement plan and quality assurance paperwork. These demonstrated their priorities for development and how they were monitoring the quality of the provision within the service.

## From this inspection we graded this service as:

Quality of care and support	5 - Very Good
Quality of staffing	not assessed
Quality of management and leadership	4 - Good

## What the service does well

The service continued to promote a positive culture which valued the contribution of people supported, in assessing and improving the quality of the service provided.

The management team remained highly committed to working in partnership with service users and/or their representatives, staff and other stakeholders to provide a very good quality service.

The service manager had continued to encourage and respond to feedback from people about the service that they received in varying forms highlighted in their participation strategy, which was having a positive impact on service delivery.

An internal quality assurance role was being developed to involve more service users and their families in this process.

The service manager agreed to review annual questionnaires to include feedback from various stakeholders and to include questions around the management and leadership of the service.

Service users views were being taken into account on deciding the support they received and how support times would be used to ensure their own personal outcomes were being met to a high standard. Care plans were routinely reviewed to ensure individual changing needs were assessed and reviewed, ensuring service users retained their independence for as long as possible.

Service users were encouraged and supported to involve their family and friends in their lives, including making decisions about and providing care and support.

Service users and relatives attended to their own financial affairs and there was a policy in place for staff to follow when attending to daily messages and errands for individuals.

Infection control procedures were followed to a high standard. Staff were observed wearing protective clothing following legislation and best practice.

Care staff were undergoing best practice informed dementia training focusing on understanding the rights of people living with dementia. As a result of this, service users were recognised and accepted for who they were and were treated with dignity and respect. Further training was yet to be accessed for staff in a more senior role. (See requirement 1)

Where the person was living with dementia, we could see they were supported to manage the impact of the cognitive impairment on their health and wellbeing. This had enhanced service users quality of life and emotional wellbeing.

Service users felt safe and secure at home and in their community as a result of using this service. They could rely on the service to respond compassionately and professionally to any difficulties arising.

Liaising with other healthcare professionals and families to ensure any changes in their health care needs were being promptly addressed.

## What the service could do better

Although care staff knew a lot about service users and their previous lives, and some of their diagnosed conditions and legal status, this was not always clearly documented within care plans. The service manager agreed to consider how care plans could be developed to include this information, including welfare guardians and Do Not Attempt Resuscitation (DNACPR) documentation. (See re stated recommendation 2)

The following recommendations have been restated from the previous inspection on:

21 March 2017. (See recommendations 1, 2, 3, 4 and 5)

Recommendations 9, 10, 12, 13, 14 and 15 from the previous inspection on 21 March 2017 have also been restated as a requirement. (See requirement 1)

Best practice regarding service users who smoked was not always being followed. (See recommendation 6)

There was no detailed service improvement plan clearly recording the service future aims and objectives, identifying goals to work towards. There was a basic contingency plan in place which needed reviewed and updated and shared among service users and staff.

## Requirements

**Number of requirements:** 1

1. The service provider must ensure they and the service manager have a good knowledge and understanding of their legal roles and responsibilities within the service and the regulatory process.

These should include:

- Ensuring they and all staff have regular supervision and appraisals following their policies and procedures, including detailed records of discussions held and actions agreed, which are routinely reviewed and evaluated. Any professional conduct and work related issues should be clearly identified and recorded with defined review periods.
- Ensuring detailed individual learning and development plans are in place, with regular review recording training held and points learned and how this will be reflected in staff practice leading to better outcomes for service users.
- Ensuring all staff complete up-to-date training necessary for their roles and responsibilities, including dementia training, appropriate to their role in accordance with the Promoting Excellence Framework, which is reviewed and evaluated to ensure relevant learning points have been understood and are promoting changes in staff practice.
- They must comply with all conditions of registration and where required, notify the Care Inspectorate of various changes and events as requested.  
These should be submitted to the Care Inspectorate within timescales allocated at all times.
- They should ensure they routinely assess, review and evaluate all systems and procedures through their detailed quality assurance processes.

This is in order to comply with SSI 2011 No.210. Fitness of managers 7.-(1) A person must not act as a manager in relation to a care service unless the person is fit to do so.(2) the following persons are unfit to act as a manager in relation to a care service:- (c)a person who does not have the skills, knowledge and experience necessary for managing a care service

National Care Standards, care at home - Standard 4: Management and staffing.

We signposted the service manager to the following guidance:

Records that all registered care services (except childminding) must keep and guidance on notification reporting.

Publication date: February 2012.

Amended: 1 April 2015: Changes made on notifying adverse events involving controlled drugs.

## Recommendations

**Number of recommendations: 7**

### 1. Re stated for the second time

The service manager should consider how service information can be offered to those service users and relatives with varying communication difficulties, such as visual and cognitive impairment. The service manager should also consider how service users with communication difficulties and relatives who do not attend meetings regularly, can be supported and encouraged to express their views on any aspect of the service.

National Care Standards, care at home - Standard 1: Informing and deciding, Standard 3: Your personal plan and Standard 10: Supporting communication.

## 2. Re stated for the second time

The service manager should ensure that care plans contain clearly detailed information, including best practice guidance for staff, to follow when attending to individual healthcare needs, such as catheter care and attending to food hygiene.

National Care Standards, care at home - Standard 3: Your personal plan and Standard 7: Keeping well - healthcare.

We signposted the service manager to the following guidance:

Indwelling Urinary Catheter maintenance - A guide for care staff (Care Inspectorate/NHS Education for Scotland) and cook safe, food safety assurance system issue 1.2, May 2012.

## 3. Re stated for the second time

The service manager should ensure that all six monthly reviews are timeously completed, with clear detailed records of discussions held, actions agreed and when they were met.

National Care Standards, care at home - Standard 3: Your personal plan and Standard 11: Expressing your views.

## 4. Re stated for the second time

The service manager should ensure that staff follow best practice guidelines, when administering all medication including topical creams. Medication training and policies and procedures should contain up-to-date best practice, and the service manager should have a process in place to assess and review staff competencies within these. All records should be appropriately completed and reviewed and evaluated to ensure any errors are timeously addressed.

National Care Standards, care at home - Standard 3: Your personal plan, Standard 4: Management and staffing and Standard 8: Keeping well - medication.

We signposted the service manager to the following guidance:

The handling of medications in social care (Royal Pharmaceutical Society of Great Britain).

## 5. Re stated for the second time

The service provider should review all policies and procedures to ensure that they reflect up-to-date best practice and legislation.

She should pay particular attention to the following which have been highlighted through this report:

Medication

ASP/CSP

Staff induction/promoted posts

Supervision and appraisal

Training

Complaints.

National Care Standards, care at home - Standard 4: Management and staffing.

6. The service manager should ensure that staff follow best practice and legislation when supporting service users who smoke in their own homes.

National Care Standards, care at home – Standard 5: Management and staffing.

We signposted the service provider to the following;

<http://www.healthyworkinglives.com/advice/Legislation-and-policy/employee-issues/smoking>

7. The service manager should ensure they have a clearly detailed service improvement plan recording their future aims and objectives, identifying areas for improvement and goals to work towards. There should be a detailed contingency plan in place clarifying service provision in event of any emergency which is discussed with service users and staff.

National Care Standards, care at home – Standard 4: Management and staffing.

## Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at [www.careinspectorate.com](http://www.careinspectorate.com).

## Inspection and grading history

Date	Type	Gradings	
9 Mar 2017	Unannounced	Care and support	5 - Very good
		Environment	Not assessed
		Staffing	4 - Good
		Management and leadership	Not assessed
26 Feb 2016	Unannounced	Care and support	5 - Very good
		Environment	Not assessed
		Staffing	5 - Very good
		Management and leadership	5 - Very good
12 Mar 2015	Unannounced	Care and support	5 - Very good
		Environment	Not assessed
		Staffing	5 - Very good
		Management and leadership	5 - Very good
29 Jan 2014	Announced (short notice)	Care and support	4 - Good

Date	Type	Gradings	
		Environment Staffing Management and leadership	Not assessed 5 - Very good 5 - Very good
20 Feb 2013	Unannounced	Care and support Environment Staffing Management and leadership	2 - Weak Not assessed 4 - Good 3 - Adequate
28 May 2010	Announced	Care and support Environment Staffing Management and leadership	5 - Very good Not assessed 4 - Good 4 - Good
8 Oct 2009	Announced	Care and support Environment Staffing Management and leadership	2 - Weak Not assessed 1 - Unsatisfactory 3 - Adequate
25 Sep 2008	Announced	Care and support Environment Staffing Management and leadership	2 - Weak Not assessed 2 - Weak 3 - Adequate



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