

Brenda Riley

# Lettershanner

## Inspection report

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Date of inspection visit: 09/07/2014  
Date of publication: 27/01/2015

### 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 

### Overall summary

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection was planned to check whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, and to pilot a new inspection process being introduced by CQC which looks at the overall quality of the service.

The inspection was announced with short notice.

The provider offers personal care and support to people in their own homes in the Telford, Bridgnorth and surrounding areas. Six people used the service at the time of our inspection. There was a registered manager at the time of our inspection. A registered manager is a person who has registered with the Care Quality Commission to manage the service and has the legal responsibility for meeting the requirements of the law; as does the provider.

# Summary of findings

People who used the service were encouraged to retain their independence. People agreed to the level of support they needed and how they wished to be supported before the service commenced. Where people's needs changed, the provider responded well and reviewed the care provided which ensured people were safe. This meant people received care that meets their needs.

We saw staffing was managed flexibly to suit people's needs. This meant people received their care when they needed it. Where people had healthcare appointments the registered manager provided flexible support which enabled people to attend their commitments.

People told us they were happy with the care and support they received. They felt staff were kind and caring, and

had the knowledge and skills to support them. People spoke positively about the care they received in their homes. Everyone we spoke with told us they would recommend the service.

There were clear management structures which offered leadership, support and guidance to staff in order that they could do their job well and support people.

People told us they were consulted about their views on the service by means of an annual survey and individual care reviews. This meant that the provider ensured that the service was monitored and improvements made where necessary.

# Summary of findings

## 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 is safe.

People who used the service told us they felt safe.

Staff we spoke with knew how to keep adults safe.

They could identify the signs of abuse and knew the correct procedures to follow if they thought someone was being abused.

Good



### Is the service effective?

The service is effective.

People who used the service received care from staff who were trained to meet their individual needs. People told us they felt staff were skilled to support their needs.

Good



### Is the service caring?

The service is caring.

Staff we spoke to appeared to genuinely care about the people they supported. People told us staff were kind and caring.

Good



### Is the service responsive?

The service is responsive.

People had detailed care plans which were clear, they gave a good level of information setting out how each person should have their needs met. The service was responsive to people's changing needs. There was a complaints procedure for people to use and information about this and other important information was provided to people at the start of the service.

Good



### Is the service well-led?

The service is well led.

The registered manager had systems in place to monitor quality assurance at the service. Staff were aware of their roles and responsibilities because there was a clear management system in place. People told us they received a good, reliable consistent service.

Good



# Lettershanner

## Detailed findings

### Background to this inspection

We visited the office on 9 July 2014. This inspection was announced which meant the provider and staff knew we were coming. The inspection team consisted of one inspector and an Expert by Experience. Our expert by Experience had Experience in domiciliary care services and spoke with people to gain their views. They spoke with six people by telephone.

Before our inspection we reviewed all the information we held about the service. This helped us to decide what areas

to focus on during our inspection. We also spoke to two local authority contracts departments before our inspection. They told us they did not have any issues or concerns about the agency. We also looked at the information we had asked the provider to send to us before we visited. This is called the provider information return.

During our inspection we looked at policies, records and auditing processes. This was to see how the provider led and monitored the service.

The provider was registered 6 May 2014. (They were previously registered at a different location and moved).

# Is the service safe?

## Our findings

Care and treatment was planned and delivered in a way that was intended to ensure people's safety and welfare. We saw that individual needs were assessed before a service commenced. This ensured the agency could meet the person's needs.

Staff spoken with had a clear understanding of the procedures in place to safeguard people from abuse. This meant staff knew how to respond if they witnessed or suspected any abusive practice. We were told by the registered manager there had been no safeguarding referrals made to the local authority safeguarding adults team since the agency was registered. This meant that there had been no reports of allegations of potential abuse that required investigation.

We discussed the Mental Capacity Act 2005 (MCA) with the registered manager. Staff members working in health and social care who work with people who lack capacity to make particular decisions have a duty to know about and follow the Acts codes of practice. It was reported by the registered manager that staff had completed training in this area. There were no people who used the service at the time of our inspection that lacked capacity to make their own decisions.

People who used the service were protected from incidents of bad practice because the necessary training and policies were in place so staff knew what to do to keep people safe. Staff we spoke with told us, "Training is very good" and "We keep up to date with our training every year". We saw evidence of this when we looked at training certificates for the staff.

People who used the service told us they felt safe with the agency staff and would know how to raise concerns if they had any.

People told us they were visited by someone from the agency before their support began to discuss their needs. We saw that people's needs were assessed prior to a service starting from records that were shown to us. This ensured the agency could meet people's needs and any risks were identified and assessed before support began.

Care plans were informative, clear, up and to date and reviewed regularly. Care plans included equipment sheets that detailed equipment in use in people's homes. Care workers sign these off at each visit to say they have checked equipment is safe to use before use. Care plans also contained emergency information that could be handed to emergency teams if necessary. For example information about the persons next of kin and medicines details. The registered manager told us a care plan review was due for one person because their circumstances had changed recently. This meant the registered manager acted promptly to address any changes which ensured people's safety was maintained. Staff we spoke with told us the care plans were clear and useful. Staff we spoke with were able to explain to us how they respected people during their visits.

The agency provided care and support to a small number of people. There were sufficient staff employed at the agency to meet people's identified needs. People told us that staff arrived on time and stayed the allotted amount of time they were scheduled to.

Risk assessments were in place to help protect staff from environmental issues within people's homes. Staff we spoke with were clear about their role and how to provide a service to people. The staff knew people well and were able to describe how their needs were met. Staff told us they were updated with any changes to people's care and support that they needed to be aware of.

We also saw in care records that the agency had contacted outside healthcare professionals.

# Is the service effective?

## Our findings

People spoke highly about the staff and the care they provided. Everyone we spoke with felt that the staff had the right skills and knowledge to give them the appropriate care and support they required. For example one relative told us that the staff always ensured that their relative had access to the emergency call bell before they left.

The staff told us they would always be trained in individual care needs when someone required specialist care. Records and certificates we saw in staff's personnel files, which were held securely in the office, showed that specialist training had been completed.

Staff told us they felt they received good informal support from the registered manager who worked alongside them on a daily basis. They also told us they were able to go to the registered manager if they had any concerns.

Staff told us they received on-going support to do their job effectively. We saw records which showed unannounced

checks by senior staff had taken place which ensured staff were arriving on time, wearing their uniforms and carrying out the care in the correct way. Staff confirmed these had taken place.

Within the care plans we looked at the office we saw that contacts for next of kin and GP's were listed. This would ensure that a change to a person's health could be acted upon by a care staff member if and when required.

Staff were able to tell us about the individual needs of the people they cared for. Because of the small size of the agency care workers provided consistent care to people and therefore got to know the people they supported well.

Where people required support with meal preparation we looked at the daily records for those people and saw there were entries for all the periods we checked, which recorded the support people had received with regard to meal assistance and any relevant observations. The registered manager confirmed there was nobody with any special dietary needs at the time of our inspection.

# Is the service caring?

## Our findings

People who used the service told us they were treated with kindness and staff were genuinely caring. Everyone told us staff treated them with respect and maintained their dignity. For example one relative told us, "The staff close the curtains and the door before assisting [relative] to get undressed". We asked if staff always treated people with respect and maintained their dignity people told us, "No problems at all" and "Staff are very patient and don't put me under any pressure". Further comments included, "You couldn't wish for better" and "They deal with it appropriately".

Staff were able to give examples of how they maintained people's privacy and dignity when supporting people. One person told us, "I always draw the curtains when I help [person] to bed. Another person told us, "I cover my clients with a towel or dressing gown when I help them with personal care. Another person told us, "I always find out what a person likes to be called and I will use this when I talk to them".

Everyone we spoke with told us they felt able to talk to discuss health issues with staff because the staff got on with them well and understood their needs. They told us it helped because there was only a small number of staff and staff related well to people. They told us staff responded well to their needs.

People were encouraged to be as independent as possible. Relatives of people who used the service told us, "They help [relative] where it's needed and encourage [relative] to do what they can" and "They encourage her to be as independent as she can be". One person who used the service told us the support they received helped them to be as independent as they could be. It was evident through discussion with relatives and people who used the service that people were given choice about their care. For example the timing of visits, how they preferred to be assisted and how they required the assistance to be given.

# Is the service responsive?

## Our findings

People told us the service was flexible and accommodated individual requests. For example people had requested changes in their call times to enable them to attend appointments. People told us they were encouraged and supported to live a life that was as they wished and that their independence was promoted when care workers visited them.

Care records we looked at were clear and described what support each person required. This was shared with staff so that they understood what was required of them at each visit. Staff told us the care records were clear and detailed and helped them to understand a person's needs.

Staff we spoke with told us about the importance of including people's personal preferences and lifestyle choices into each day. One staff member said, "It's really important we let people chose".

Records showed that people who used the service and their relatives were provided with information about the support they could expect from the service. People we spoke with all told us they knew how to contact the agency.

The provider had a complaints policy and everyone we spoke with told us they knew how to make a complaint. The registered manager told us there had been no complaints since the agency had registered since moving location in May 2014. They went on to tell us that because the agency is small they worked alongside the staff therefore any issues were raised directly with them and usually resolved very quickly.

The provider had an 'on call' system in place which ensured that people who used the service or staff could gain help and support at any time. Staff confirmed this was answered promptly.

# Is the service well-led?

## Our findings

Everyone we spoke with told us they would recommend the service to family or friends. People told us a number of reasons why they would recommend the service. One person told us, "Because they're very good and they're very thorough" another told us, "They do their job, they are on time, they are caring and we get on well with them". Another person told us, "Because they're very good". Someone else told us, "Because of my experience and the same two carers" and another told us, "Because the carers are really good, reliable, consistent, friendly and pleasant with [relative]".

The registered manager used a range of methods to monitor quality assurance. The registered manager had sent out annual satisfaction surveys to people who used the service the month before our inspection. Although the service was registered in May they had previously operated from another location. This meant that they continued to provide a service to people they had done so under their previous registered location. The registered manager told

us responses had been read and they intended to give feedback in the near future. We saw completed responses and one person said, "I am happy with the service I am receiving".

Staff told us they were aware of the whistleblowing procedure and would know how to report any concerns they had about care practices. They told us they ensured people that used the service were protected from potential harm or abuse and felt they would be supported by the registered manager. One member of staff told us, "We've all had training about what to do if we see something". There was a clear management structure in place and the staff we spoke with were aware of their and others' roles and responsibilities. Both staff we spoke with confirmed the registered manager was approachable and an open door policy was in place. In order to provide effective support and supervision we saw that the registered manager had carried out spot checks on staff when they provided care and support. They recorded aspects of their practice. They checked that care was given according to the care records, and would discuss any issues that required improving with the staff member. This meant the provider had systems to check the quality of the service offered to people.