

Complete Service Solutions Ltd

Local Homecare

Inspection report

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Ratings

Overall rating for this service

Requires Improvement 

Is the service safe?

Requires Improvement 

Is the service effective?

Good 

Is the service well-led?

Requires Improvement 

Summary of findings

Overall summary

About the service

Local Homecare is a domiciliary care agency. The service provides personal care to people in their own homes in the community. At the time of our inspection there were 36 people using the service.

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 and their relatives told us they felt safe using the service. People's needs were thoroughly assessed to ensure safe and effective care. There were enough staff available to meet people's needs. People and their relatives told us staff arrived at the scheduled time and stayed for the specified period. The provider had a robust recruitment process to ensure suitable staff were employed. People were supported to take their medicines safely. Staff followed the correct infection control practices.

New staff received a comprehensive induction programme and all staff had completed a range of training which gave them the skills and knowledge to care for people in their own homes. 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 service was well managed. The registered manager was knowledgeable and responsive to feedback about the service. Governance systems were in place to ensure all aspects of the service were reviewed and checked regularly. However, systems to monitor accidents and incidents and lessons learnt required review.

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

Rating at last inspection and update

The last rating for this service was requires improvement (published 18 February 2020).

At our last inspection we found two breaches of regulation in relation to medicines and good governance. The provider completed an action plan after the last inspection to tell us what they would do and by when to improve. At this inspection we found improvements had been made and the provider was now meeting both of these regulations.

Why we inspected

We undertook this inspection as part of a random selection of services which have had a recent Direct Monitoring Approach (DMA) assessment where no further action was needed to seek assurance about this decision and to identify learning about the DMA process.

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?

Requires Improvement ●

The service was not always 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 well-led?

Requires Improvement ●

The service was not always well-led.

Details are in our well-led findings below.

Local Homecare

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 or 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 the service 24 hours' notice of the inspection. This was because the service is small and people are often out and we wanted to be sure there would be people at home to speak with us.

Inspection activity started on 12 May 2022 and ended on 06 June 2022. We visited the location's office on 24 May 2022.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority, local safeguarding team and Healthwatch. Healthwatch is an independent

consumer champion that gathers and represents the views of the public about health and social care services in England. We used all of this information to plan our inspection. 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 this information to plan our inspection.

During the inspection

We reviewed a range of records. This included three people's care records and extracts from others. We looked at three staff files in relation to recruitment, training and supervision. We viewed a variety of records relating to the management of the service, including records relating to accidents, incidents and safeguarding. We also reviewed a range of policies and procedures.

We spoke with the registered manager and four members of care staff. We spoke with five people who used the service and five relatives, to better understand their experience of care provided at the service.



Is the service safe?

Our findings

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

At our last inspection we rated this key question requires improvement. The rating for this key question has remained requires improvement.

This meant some aspects of the service were not always safe and there was limited assurance about safety. There was an increased risk that people could be harmed.

Using medicines safely

At our last inspection the registered provider did not have systems in place to manage medicines properly and safely. This was a breach of Regulation 12 (Safe Care and Treatment) of The Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 12.

- At this inspection we found the provider had a system in place to record medicine administration electronically. The registered manager provided evidence of further improvement to the system through monthly audits and changes to the electronic care planning system.
- All staff who administered medication had been trained and they told us their competency to administer medication had been assessed. We reviewed competency assessments and the provider had ensured robust checks had been carried out.
- People and relatives told us medication was administered safely and in line with their preferences.

Systems and processes to safeguard people from the risk of abuse

- Staff had received training in safeguarding people and knew what to do if they thought somebody was at risk. Whilst staff were very confident to raise concerns to the registered manager, staff were not clear about contacting the local authority safeguarding team directly.
- We found safeguarding concerns were raised however recorded learning outcomes were limited. The registered manager took immediate action to improve learning which could then inform improvement.
- People told us they received safe care and had no concerns about their safety.

Assessing risk, safety monitoring and management

- Risks to people's health and welfare were assessed and clear plans put in place to manage and mitigate identified risks. However, this was not always the case for people new to the service. The registered manager had a plan to bring all care plans and risk assessments up to date into the new electronic care planning system.
- Monitoring risk and safety when delivering the service was done through review of daily records, monthly audits and management review.

- Records of accident and incidents were not always completed. The registered manager took immediate action to address this.

Staffing and recruitment

- There were sufficient staff to provide consistency of care and support to people. People told us care calls were not missed, and they were informed if carers were going to be delayed.
- Safe recruitment procedures were followed to help ensure staff were suitable to work with people. This included Disclosure and Barring Service (DBS) checks which provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.
- Effective systems were in place to organise and monitor calls, making sure visits had been completed.

Preventing and controlling infection

- Staff had plentiful stocks of, and people told us staff wore, personal protective equipment (PPE) appropriately.
- The provider had an up to date infection prevention and control policy.

Learning lessons when things go wrong

- Management had responded well to concerns raised and procedures detailing lessons learnt from complaints or feedback. People told us that the registered manager was very responsive to feedback and followed up actions consistently.
- We saw evidence not all accidents and incidents were being recorded and there was no overall analysis identifying any patterns or trends which could be addressed, and subsequently reduce any apparent risks. The registered manager took immediate action to address this.

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.

At our last inspection we rated this key question requires improvement. At this inspection the rating has changed to 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's needs were thoroughly assessed in the care plans and risk assessments we reviewed. However, a person new to the service had not been thoroughly assessed before starting with the service. The registered manager had a plan to address this.
- People and relatives confirmed they were regularly involved in the assessment and their needs and preferences were taken into consideration.
- Care plans and risk assessment confirmed a person-centred culture was in place to ensure people were supported to take risks and promote their own independence and day to day activity.

Staff support: induction, training, skills and experience

- Staff received the induction, training and support they required to fulfil their roles.
- People and relatives told us staff were well trained and competent. One person told us, "New staff were keen to be coached by other health professionals to assist them with their self-care."
- New staff received an induction and period of shadowing more experienced staff before working alone. The registered manager undertook spot checks to ensure competency.
- Staff received ongoing training which was kept up to date.
- Staff were supported by the provider and received regular supervision. Staff told us communication was very good with the registered manager and they received regular newsletters and texts when staff were unable to meet during the COVID-19 pandemic.

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

- People and their relatives told us staff provided the necessary support to ensure people ate and drank in line with their preferences.
- Where people needed support with meals, this was recorded in the support plan and included any dietary preferences.

Staff working with other agencies to provide consistent, effective, timely care

- Staff worked with other professionals to support people's health and wellbeing. People told us staff assisted them contacting other professionals when they needed.
- Specialist support and advice was sought and acted upon. One person told us, "The [registered manager] had sought advice from a health care professional to ensure staff were competent to use specialist

equipment for their care."

Supporting people to live healthier lives, access healthcare services and support

- People told us staff helped them to access other support services they required. One person told us, "Staff do things I need them to do."

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.

- Before people received any care and treatment they were asked for their consent and staff acted in accordance with their wishes. People's individual wishes were acted upon, such as how they wanted their personal care delivered. One person told us, "If I tell carers I'm not feeling right when I get up and I ask them to give me five minutes, that's what they do, and they check in with me."
- Within people's care plans, it documented if the person had capacity and if they required any support with making decisions.
- Within their induction, all staff received training regarding the MCA.
- People's consent to their care and treatment was documented in their care records. However, a person new to the service, did not have this in place, the registered manager had a plan to address this.

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 our last inspection we rated this key question requires improvement. The rating for this key question has remained requires improvement.

This meant the service management and leadership was inconsistent. Leaders and the culture they created did not always support the delivery of high-quality, person-centred care.

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

At our last inspection the registered provider's systems were either not in place or robust enough to assess and monitor quality and safety. This was a breach of regulation 17 (Good governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 17.

- The registered manager understood their responsibility to those they supported as well as their staff.
- The registered manager had good oversight of the service. There were some audits in place and the registered manager was working towards updating the auditing system.
- Policies and procedures were in place to support the running of the service. The registered manager told us they were planning to highlight key policies to staff to support continuous development.

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

- People and relatives told us there was a marked improvement to communication and response to feedback since the registered manager came into post.
- People with specific and complex needs told us they felt listened to and that their care was person centred.
- The registered manager undertook consultation with people, relatives and other professionals to ensure person centred care was being delivered.

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

- There was a positive culture at the service. People and their relatives told us they were involved in the care provided and felt their views were listened to.
- Staff told us they felt positive about the service and the registered manager encouraged communication and feedback. One staff member said, "I feel very supported by [registered manager]."

- People, their relatives and staff had been invited to share feedback about the service through surveys, quality visits and phone calls. Comments received were positive.

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

- The registered manager understood duty of candour. This requires providers to be open and honest with people when things go wrong with their care, giving people support, and providing truthful information and a written apology.
- The provider was sending statutory notifications to CQC. Registered service providers and their registered managers are required to notify CQC about certain incidents, events and changes through statutory notifications. However, these were not being monitored and analysed robustly to ensure continuous improvement of the service. The registered manager had a plan to address this.
- The provider displayed their current CQC rating in the service, however, this was not displayed on their website prior to and at the time of inspection. The registered manager took immediate action to address this.

Continuous learning and improving care

- The registered manager told us they were keen to access groups and organisations that could assist embed improvements to the service. They also utilised spot checks on staff to seek feedback from people and relatives and continuously looked for ways to improve delivery of care.
- People and their relatives told us their feedback led to continuous improvements in the care received. One person told us, "[Registered manager] will try their best and always gets back to me to solve problems."

Working in partnership with others

- The service worked closely with other health and social care professionals to ensure people received consistent and timely care. The registered manager told us there had been improvements in communications with GPs and this had led to improved care.