

Line of Sight Care Ltd

Line Of Sight Care Limited

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

Line Of Sight Care Limited is a domiciliary care service providing personal care to people living in their own homes. At the time of the inspection, the service supported 50 people with personal care.

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 felt safe and well supported by staff. Staff knew how to report any concerns about people's safety or welfare. Risks to people had been assessed and staff used this information to support people safely. Medicines were managed safely by trained staff. Staff followed infection prevention and control guidance to reduce the risk of infections. There were reviews of incidents and accidents, and preventative actions had been taken when needed.

People's needs were assessed, and they were happy with the quality of their care. They were supported by staff who were appropriately trained for their roles. Staff felt supported by the management team. When required, staff supported people with eating and drinking, and they respected people's preferences and choices.

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 and relatives told us staff were kind, caring and friendly. One person said, "Some of the carers (staff) are very good, I get on well with them. We often laugh and joke together." Staff spoke fondly about people they supported, and they said they enjoyed working at the service. People were involved in discussions about their care and support. They had copies of their care plans and they reviewed these regularly with senior staff. People said staff supported them in a way that promoted their privacy, dignity and independence.

People said their care was planned and delivered in a way that met their individual needs. Staff understood people's communication needs so that they could provide person-centred care. People's complaints and concerns were dealt with in a timely way. Staff supported people at the end of their lives if this support was required.

People relatives and staff were asked for their views about the service and felt listened to. There were robust monitoring processes in place to help ensure a good standard of service. Quality assurance systems identified any areas that needed further development. The registered manager was away from the service at

the time of the inspection, the service was supported by an interim manager. They worked closely with the care team co-ordinators and regional manager to help ensure a smooth transition and a good service for people.

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 10 August 2018 and this is the first inspection.

Why we inspected

This was a planned inspection based on the provider's registration date and our monitoring of the service.

Follow up

We will continue to monitor information we receive about the service until we return to visit as per our re-inspection programme. If we receive any concerning information, we may inspect sooner.

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.

Line Of Sight Care Limited

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 Care Act 2014.

Inspection team

The inspection was carried out by two inspectors and an Expert by Experience. An Expert by Experience is a person who has personal experience of using or caring for someone who uses this type of care service.

Service and service type

This service is a domiciliary care agency. It provides personal care to people living in their own homes.

The service had a manager registered with the Care Quality Commission. 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.

Notice of inspection

We gave a short period notice of the inspection. This was because we wanted to ensure the registered manager would be available to support the inspection.

Inspection activity started on 19 May 2021 and ended on 24 June 2021. We visited the office location on 24 June 2021.

What we did before the inspection

We used the information the provider sent us in the provider information return. This is information providers are required to send us with key information about their service, what they do well, and improvements they plan to make. This information helps support our inspections.

We also reviewed information we held about the service.

We used all of this information to plan our inspection.

During the inspection

We spoke with 13 people who used the service, eight relatives and six staff by telephone.

We contacted stakeholders including the local authority and Healthwatch for feedback. Healthwatch is an independent consumer champion that gathers and represents the views of the public about health and social care services in England.

We asked the provider to send us various records and documents that we reviewed before the visit to the office location.

We looked at further records during the visit to the office location. We also spoke with the registered manager and a coordinator.

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 for this 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 told us they felt safe with staff who supported them. This was also confirmed by relatives we spoke with. One person said, "Carers (staff) are very trustworthy. I feel safe in that case." A relative said, "[Person] is secure and safe when carers are there, and we all trust them."
- Staff were trained and there was guidance to help them to know what to do if they suspected that people were at risk of harm. Staff knew to report concerns to the registered manager.
- The registered manager reported safeguarding incidents to CQC and the local authority safeguarding team quickly.

Assessing risk, safety monitoring and management

- People and their relatives told us people were supported safely by staff. One person said, "I feel safe and happy with the regular carer (staff) because she knows my needs." A relative said, "I'm very pleased with the carers (staff). They always make sure to put all the equipment in a safe place to prevent any falls."
- People had risk assessments to guide staff to support them safely with their individual needs. For example, one person living with diabetes had an emergency plan to help staff identify when they had low or high blood sugar levels. This included information about what they needed to do to get urgent care for the person.
- Staff told us they were aware of people's risk assessments. They reported to the registered manager if these needed to be updated when people's needs changed.

Staffing and recruitment

- Staff were recruited safely. The registered manager carried out appropriate checks to ensure staff were suitable to work at the service. This included obtaining references from previous employers and criminal record checks.
- People told us there were always staff available to support them. They said they were normally supported by regular staff who understood their needs.
- There had not been any missed care visits, but people had mixed views about the timeliness of the care visits. However, records showed that staff normally arrived within agreed timeframes.
- Staff told us there was enough of them to support people safely. One staff member said, "Staffing is okay. Senior staff or the registered manager help when we get stuck because of leave."

Using medicines safely

- People told us they or their relatives managed their medicines and they did not require support from staff. One relative told us that some of their family member's medicines were given to them by community nurses.

- Staff told us they supported some people with their medicines. They said this was safely managed because they had been trained and they followed information on people's medicines administration records.
- Senior staff and the registered manager regularly checked staff's competence to administer medicines safely. They also audited medicines administration records to ensure people were given their medicines properly.

Preventing and controlling infection

- People told us they felt safe with how staff supported them because they always used appropriate personal protective equipment (PPE) to prevent infections.
- The provider had policies and guidance to help staff to work in accordance with current guidance on infection prevention and control.
- Staff said they could get a supply of PPE when needed. They were trained and they knew how to prevent infections. Senior staff regularly checked that staff were using PPE correctly, and that they followed guidance.

Learning lessons when things go wrong

- The provider had systems to record, analyse and learn from incidents and accidents that may occur during the provision of care.
- The registered manager shared the learning from these events with staff during training, team meetings and using electronic messaging services. Staff confirmed this. One staff member said, "We get additional information if anything needs changing."

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 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

- The provider had systems to assess people's needs before they started using the service. This ensured they had accurate records of people's individual needs, risks and preferences.
- People and relatives told us the service used the information they provided to develop care plans so that people received the right care. They were happy with the quality of care provided by staff. One person said the registered manager came with one of the care staff to ensure the staff understood what they needed to do to meet their individual needs and preferences.
- There were regular reviews with people to ensure they were happy with their planned care. Senior staff recorded any agreed changes and they updated people's care plans accordingly.

Staff support: induction, training, skills and experience

- People and relatives told us staff knew how to support people well. One person said, "I was impressed with very efficient and trained staff."
- Staff were trained in areas relevant to their role. Records showed staff had completed their mandatory training and any other training required to support people with specific health needs. Staff commented positively about the quality of the training. One staff member said, "Training is good. We do both online and manual training." This meant people were supported by staff who were trained and skilled.
- Records showed staff had regular supervision and they had competency assessments to ensure they had the right knowledge and skills to provide effective care. Staff told us they were well supported by senior staff. One staff member said, "Supervision is fine, I like to know if I need to improve anything."

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

- Some people were supported by staff with eating and drinking. People and relatives said staff always offered appropriate support.
- When people required this support, it was recorded in their care plans so that staff knew their preferences.
- Staff told us people would normally tell them what they wanted to eat or drink.

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

- People and relatives told us staff supported people well with their health needs. They said staff noticed when people's health needs changed, and they informed relatives and sought medical help. One relative said, "Care staff noticed some swelling on [person]'s hands and they told me." Another relative said staff immediately called for an ambulance when their family member had a fall.
- Staff told us they would always seek advice from senior staff if a person became unwell. They also knew to

contact emergency services if required.

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 Act 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 and we found these were being met.

- People and relatives told us staff asked for people's permission and consent before providing any care and support. They said staff were always respectful of people's decisions.
- There were records in people's care files that showed they gave consent to being supported by staff.
- Where people had been assessed as lacking mental capacity to consent to their care and support, records showed the registered manager had discussions with their relatives or other relevant people. This ensured care was provided in people's best interest.
- Staff had MCA training as part of their mandatory training. They knew the importance of supporting people in a way that protected their rights.

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 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

- People and relatives told us staff were caring, respectful and they always treated people well. One person said, "Care staff are very kind and friendly." Another person said, "Carers are polite and pleasant."
- Relatives also commented positively about the caring nature of staff. One relative told us, "Carers (staff) are very sympathetic, thoughtful and sociable with [person]."
- As much as possible, the service ensured people were supported by regular staff so that they could get to know them well and develop good relationships. One relative said, "Regular carers (staff) are heroes." This was because the person could rely on regular staff to understand their needs and to provide good support.
- Staff spoke fondly about people they supported. They said the registered manager encouraged them to go over and beyond expectations to ensure people were happy with their care. One staff member said, "Our clients are very lovely, and they make the job really nice. We do more for them to make their day special, like on their birthday." We saw photographs showing that the service gave people cards, flowers and chocolates to celebrate their birthdays.

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

- People and relatives told us they were involved in making decisions about people's care. They told us about discussions they had with the registered manager to check how people wanted to be supported. They said this was considered when planning people's care plans and staff also asked people what they wanted during each care visit.
- A relative of a person with communication needs told us that staff managed to communicate effectively with them. In the provider information return, the registered manager told us staff communicated with one person using an alphabet board.
- People's care plans included information about their preferences and choices. Staff told us they always followed these so that people received the support they wanted.

Respecting and promoting people's privacy, dignity and independence

- People and relatives said staff supported people in a way that promoted their privacy, dignity and independence. One relative said, "During [person]'s personal care, I heard the care staff was very polite and was encouraging [person] to do for herself what she can manage to do. The care staff also explained how to do this."
- Another relative told us staff were very respectful, considerate and gentle in the way they supported their family member. They recalled a time when a staff member put the heating on so that the person was warm during personal care.
- Staff said they always protected people's dignity by ensuring they provided personal care in a private area.

They said this was particularly important when people lived with their family members.

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 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 told us they received the care they wanted, and they were happy with how staff supported them to meet their needs. One person said, "I am happy here at my own home, and I've been looked after well. The girls (staff) are amazing and very helpful."
- Some people and relatives said staff did not always arrive at agreed times. However, monitoring records for visit times showed that staff mostly supported people within agreed timeframes. Where delays were unavoidable, such as when staff needed to stay longer with another person or there was a lot of traffic, staff told people they would be late. The provider also arranged alternative staff cover if this was necessary.
- People had copies of their care plans and where possible, they signed these to show that they agreed with the planned care. Records showed that senior staff carried out monthly reviews of care plans with people and if necessary, with their relatives.

Meeting people's communication needs

Since 2016 onwards all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard (AIS). The standard was introduced to make sure people are given information in a way they can understand. The standard applies to all people with a disability, impairment or sensory loss and in some circumstances to their carers.

- Staff told us they got to know about people's communication needs when they met them during their introductory visit with the registered manager and from care plans. They also spoke with relatives about how to best communicate with people to better understand their needs.
- There was additional information about the preferences and routines of people living with dementia to help overcome problems with communication. This helped staff and other professionals to provide person-centred care.

Improving care quality in response to complaints or concerns

- People and relatives said they knew how to complain if they were not happy with their care. A relative said, "We have some documents provided by the agency (service), so we are aware of how to make a complaint." They also said, "We are very happy with service and there is nothing to complain about."
- Records showed that the provider had a system to manage people's concerns and complaints. The registered manager investigated people's concerns and responded to them in a timely way. One relative told us their complaint had been dealt with effectively.

End of life care and support

- Staff supported people at the end of their lives if this support was required. There were care plans to help staff with this.
- Relatives told us staff worked with health professionals so that they supported people well.
- Staff were trained and supported to know how to provide good care to people at the end of their lives.

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 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

- The registered manager had a lot of experience of managing care services. They are also one of the directors of the provider organisation. They told us their biggest achievement was the good reputation they had built in the short time the service had been operational. They said this was due to having an effective staff team, who provided a good service to people.
- People and relatives said the service was well managed, and most people we spoke with had met the registered manager. One person said, "I am happy with the service and the care staff who look after me well." Another person said the registered manager was very respectful and approachable.
- Staff said they enjoyed working at the service, and the registered manager encouraged a caring and respectful culture within the service. One staff member told us, "I am happy working for the agency (service), and it is good. Everything is going well."

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 their legal responsibilities to be open and honest when things go wrong. They reported incidents to CQC and the local authority in a timely way. Records showed they took appropriate action to deal with any concerns.
- Staff knew about the provider's whistleblowing policy and they told us they felt safe to report concerns to the registered manager. They were also confident their concerns would be dealt with appropriately.

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

- People and relatives told us they spoke regularly with senior staff and the registered manager. One person said, "The [registered manager] is in regular contact with me via the phone to make sure I am okay."
- Some people and relatives said they had been asked to provide feedback via a survey. Results of a recent survey showed that people were happy with the quality of their care.
- Records of compliments showed people were happy with how they were supported by staff, and the registered manager's approachable nature. One person said, "They make me feel valued." A relative said, "It's a very efficient service. The manager goes over and beyond and is very passionate about the care. They make it so easy for us."
- Staff told us they were encouraged to contribute in the development of the service and their views were valued. One staff member said, "We have lovely office staff and I hope it stays like this when the service

grows."

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

- The registered manager understood their roles and responsibilities in ensuring that the service is compliant with regulations. They had systems to carry out various audits of the service to help them to continually improve the service. They took prompt actions to improve when shortfalls had been identified.
- The service had recently grown when they took over people's care from another provider. The registered manager said it was their aim to continue to provide the same level of personalised care as they grew the service. One relative said, "They are small, but positive. [Person] received flowers and card on her birthday, and you don't receive this from a big company."
- Staff spoke positively about the support they received from the management team to do their jobs well. One staff member said they were happy because they had been supported to progress in their role. Another staff member said, "It has been difficult to work during the COVID 19 pandemic, but the managers have been supportive throughout."
- The registered manager shared any learning from the review of incidents and accidents with staff to help them prevent the risk of recurrence.

Working in partnership with others

- The registered manager and staff worked well with other professionals to ensure people received the right care and support. One relative told us staff recently worked closely with a health professional to support their family member after they had been discharged from hospital. They said this had helped the person in their recovery.
- The service is commissioned by a local authority that monitors them regularly. We received positive feedback from a representative of the local authority.