

Light Health Care Ltd

# Light Health Care Ltd

## 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

Light Health Care Ltd is a domiciliary care agency providing personal care to 15 people at the time of the inspection. 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

We expect health and social care providers to guarantee people with a learning disability and autistic people respect, equality, dignity, choices and independence and good access to local communities that most people take for granted. 'Right support, right care, right culture' is the guidance CQC follows to make assessments and judgements about services supporting people with a learning disability and autistic people and providers must have regard to it.

At the time of the inspection, the location did not care or support for anyone with a learning disability or an autistic person. However, we assessed the care provision under Right Support, Right Care, Right Culture, as it is registered as a specialist service for this population group.

**Right Support:** People, and those who knew them well, were included in planning their care to ensure it met their needs and took account of their wishes. Overall, people were supported to have 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.

**Right Care:** People were protected from the risk of abuse. Risk assessments had been carried out to identify the risks people faced. These included information about how to mitigate those risks. However, records relating to risk needed improving and we have made a recommendation about this. There were enough staff working at the service to meet people's needs and the provider had robust staff recruitment practices in place. One relative felt the timing of visits was sometimes inconsistent and communication between staff and people could be improved. The registered manager was aware, and had been addressing these concerns, including the continued monitoring of staff visit times. Infection control and prevention systems were in place. Medicines were managed effectively.

**Right Culture:** People were supported with care that was person-centred. Audits and checks of documents and systems helped ensure continuous learning and improvement. People, their family members and staff had regular opportunities to provide feedback about the service and there was an effective complaints process in place. The provider was aware of their legal obligations and worked with other agencies to develop best practice and share knowledge.

For more details, please see the full report which is on the CQC website at [www.cqc.org.uk](http://www.cqc.org.uk)

Rating at last inspection and update

The service was registered with us on 16 March 2022 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.

## 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 was safe.

Details are in our safe findings below.

Good ●

### Is the service effective?

The service was effective.

Details are in our effective findings below.

Good ●

### Is the service caring?

The service was caring.

Details are in our caring findings below.

Good ●

### Is the service responsive?

The service was responsive.

Details are in our responsive findings below.

Good ●

### Is the service well-led?

The service was well-led.

Details are in our well-led findings below.

Good ●

# Light Health Care Ltd

## 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

The inspection was carried out by 2 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 houses and flats.

#### Registered Manager

This provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations.

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 it is a small service and we needed to be sure that the provider or registered manager would be in the office to support the inspection.

Inspection activity started on 6 June 2023 and ended on 16 June 2023. We made telephone calls to people who use the service and their families on 6 June 2023 and visited the location's office on 13 June 2023.

#### What we did before the inspection

We reviewed information we had received about the service since they registered with CQC. We sought feedback from the local authority, Healthwatch and professionals who work with the service. 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 the information the provider sent us in the provider information return (PIR). This is information providers are required to send us annually with key information about their service, what they do well, and improvements they plan to make. We used all this information to plan our inspection.

During the inspection

We spoke over the telephone with 2 people who used the service and 5 family members. We spoke with the registered manager, nominated individual, administrator of the service and contacted 7 staff by email to receive feedback. The nominated individual is responsible for supervising the management of the service on behalf of the provider.

We visited the office location to review written records. We looked at three people's care records. We checked records relating to the management of the service including staff files, policies and procedures and quality assurance records.

# 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

- The service had systems in place to ensure people were safeguarded from the risk of abuse.
- People and relatives told us they felt safe when care staff visited. Their comments included, "Yes, I think [Name] is safe with the staff, they are lovely people and arrive on time, and they do sit down and have a drink with [Name]" and "We have no concerns about the staff who visit."
- Staff received training which gave them the skills required to recognise, report and record concerns.
- Staff were confident any concerns raised with the management team would be swiftly addressed to ensure people were kept safe.

Assessing risk, safety monitoring and management

- The service ensured people lived and staff worked in a safe place. Environmental risk assessments were completed, and equipment was checked to make sure it was safe to use.
- Risk assessments had been carried out to identify the risks people faced. These included information about how to mitigate those risks. However, people's risk assessments required more detail.

We recommend the provider reviews and updates people's risk assessments to ensure they are detailed so staff are clear about all risks relating to people and can support them safely. The registered manager confirmed and evidenced they had undertaken reviews of people's risk assessment before the end of this inspection.

Staffing and recruitment

- The provider had a well-organised recruitment process. Pre-employment checks, including a Disclosure and Barring Service (DBS) check were completed to ensure people recruited to the service were of good character. DBS checks provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.
- People and their relatives were mainly positive with the care calls and consistency of staff. People and relatives told us staff generally came on time. They said, "The carer arrives on time and I think they stop as long as they should" and "As far as I know the staff arrive on time, same time every day. If they are late, they phone and let another family member know." One relative felt the timing of visits was sometimes inconsistent and communication between staff and people was difficult. The registered manager was aware and had been addressing these concerns including the continued monitoring of staff visit times.
- There was an electronic visit monitoring system which enabled managers to ensure care was provided in a timely manner and ensure calls were not missed. We saw a record was kept of calls that were going to be late and records kept of conversations between the managers and people who used the service or their relative. We discussed with the registered manager people's comments on timings of visits. They confirmed

they would continue to monitor calls times and look at staff rotas to see if improvements could be made.

#### Using medicines safely

- People received their medicines as prescribed, by staff who were competent to administer medicines.
- Medication administration records were in place and checked regularly by the registered manager to ensure they were accurate.

#### Preventing and controlling infection

- People and relatives told us staff followed correct infection control procedures, washed their hands, and wore personal protective equipment (PPE) when providing personal care. One person said, "Aprons and gloves are used by staff where needed."
- Staff had received infection prevention and control training and additional information and guidance about how to protect themselves and people.

#### Learning lessons when things go wrong

- Accidents and incidents were monitored and analysed. The service identified actions to help prevent repeat events.
- The service communicated learning and important information to staff using different systems, such as, electronic messaging, face to face discussions and team meetings.



# 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

- The provider ensured people's needs were appropriately assessed, before using the service. The assessments helped to ensure effective care could be planned and delivered.
- People and their relatives told us they were satisfied with the standard of care delivered by the service. Their comments included, "The staff always ask me if there is anything else they can do, before they leave the house, I am happy with the care" and "A male carer came once, I don't want a male carer. This was sorted and now it is just ladies that come."

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

- People's care plans contained important information relating to their health contacts and any medical conditions.
- People were supported by staff who would make referrals to health and social care professionals and seek medical attention should this be needed.
- The registered manager recognised the importance of networking with health care professionals to further develop their knowledge and understanding of people's personal needs and risks. Staff had received some specialist training from health professionals so they could better support people in their own homes.

Staff support: induction, training, skills and experience

- Staff were provided with appropriate support and training.
- New and existing staff completed the provider's ongoing mandatory training as well as specialist training in line with people's needs. The provider had established systems to monitor staff training to ensure all staff completed their training in a timely manner.
- Staff new to a care setting, completed the Care Certificate. This is a nationally recognised qualification for health and social care staff and includes an assessment of their competencies when carrying out their role.
- Staff were provided with regular support by means of one to one and group meetings. Staff demonstrated a good awareness of their working roles and responsibilities and confirmed their training was on-going and relevant.

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

- Systems were in place to make sure people's nutritional needs were met. Where people required assistance with eating and drinking their support plans had clear guidance around involving people around planning meals.
- Staff monitored people if they were at risk of poor nutrition and involved healthcare professionals where

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 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.

- Staff understood the relevant requirements of the MCA and confirmed they asked for people's consent before providing care and support.
- People's capacity to make decisions was considered as part of the assessment and care planning process.
- Where people had capacity to provide consent, we saw they had signed consent forms and care records to confirm their agreement with the proposed care plan.

# 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

- People's rights were promoted, and person-centred care was delivered.
- People and most relatives expressed satisfaction with the care provided and made complimentary comments about the staff team. One person told us, "Staff take their time to care for me and are respectful" and one relative said, "The staff are very kind."
- The manager promoted and encouraged inclusion. Staff had received training on equality and diversity issues and had access to a set of policies and procedures.
- Staff understood their role in providing people with compassionate care and support. They were knowledgeable and respectful of people's diverse needs and had built positive relationships to support them.

Supporting people to express their views and be involved in making decisions about their care; Respecting and promoting people's privacy, dignity and independence

- People were supported to express their views and were consulted in individual and meaningful ways. Wherever possible people were involved in decisions about their care. One person told us, "I see the manager regularly, we talk, and she always ask me if I'm OK."
- The staff understood people's individual likes and dislikes and accommodated these when delivering their care. Staff were committed to ensuring the best possible outcomes were achieved.
- People told us staff were respectful of their belonging and property and supported them with dignity and kindness. They respected people's dignity and encouraged people to retain their independence.
- Staff worked in collaboration with people and their families to ensure good and consistent outcomes for people.

# 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 needs were assessed before a service was provided. This was to ensure their needs could be met. We saw the assessments had been completed.
- People's care plans provided staff with the information they needed to support people to understand their preferences and choices.

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.

- People's care plans described the support they needed from staff. They were reviewed regularly. This helped to ensure they were up to date, so people would receive the correct level of support from staff.
- Care plans documented people's likes, dislikes, and social histories. They contained specific details about the person's choices in relation to their care. This helped staff provide a more personalised service to each person.
- Staff were knowledgeable about people's preferences and could explain how they supported people in line with this information. Staff told us the care plans were in people's homes to follow and they were regularly updated.

Improving care quality in response to complaints or concerns

- People had access to information on how to raise concerns in line with the provider's policy and service users' guide.
- The registered manager said they would address any issues informally with each person if concerns were raised.
- People's relatives knew how they or their family member could complain about the service. They told us they felt able to raise any issues or concerns with the staff and provider. One person said, "I don't have any worries, but I would tell my family and the manager." A relative said "I would complain to the manager if I had any worries, she is a really lovely person."

End of life care and support

- The service was able to provide end of life support in conjunction with health professionals where

required. At the time of the inspection no one supported by the service was receiving end of life care.

- Training in end of life care had been provided for some staff.

# 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; 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 service had a person-centred, caring culture and the care people received met their needs and outcomes. We received consistently positive feedback about people's experience of the service. One person said, "I would not change anything. I would give them 9 out of 10 because they are so good, I would recommend the service, the staff are all lovely." A family member told us, "I would recommend the service yes, I would. I am very happy with the care [name] is given."
- Staff morale was positive. They told us they were treated well, and they enjoyed their jobs. Comments from staff included, "I enjoy working here because of how we all work as a team, and everyone is involved and included. We are all passionate about making a positive difference in people's lives and helping other people."
- The registered manager and staff were open, honest, and transparent, in accordance with the duty of candour.

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

- The registered manager and staff were motivated about their roles and understood their responsibilities. Staff displayed a clear desire to achieve good outcomes for people.
- There were processes in place to monitor the quality and safety of the service.
- Spot checks and competence evaluations were completed with staff regularly. This helped management to monitor the quality of care being provided and to understand where further training, mentoring and support was required.
- There were systems in place to monitor how the service was being delivered, to help ensure people were receiving safe, good quality care. This included monitoring the timeliness of care visits, the duration of those visits and whether people were receiving the care they needed. The provider still needs to embed and sustain these systems over a longer period of time.
- The registered manager was open to receiving feedback about the service and had a drive to continuously learn, improve, and provide good quality care.

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

- People using the service and their relatives had opportunities to give feedback about the service. They

were actively encouraged to do this via the complaints and compliments process. People said they also saw the registered manager and the providers nominated individual on a regular basis and so were able to provide feedback directly to them. When feedback had been provided by people using the service or their relatives, this had been shared with relevant staff members and acted on.

- Staff had regular opportunities to share their ideas about how to improve the service, via staff meetings and supervision sessions. Staff told us they were listened to, and they were confident any concerns or issues they raised would be dealt with appropriately by the management team.

Working in partnership with others

- The service worked in partnership with other agencies to review and address any changes in people's support requirements as required.