

Lavender Care Agency Limited

Lavender Care Agency 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

Lavender Care Agency Ltd is a domiciliary care agency providing personal care to two people at the time of the inspection. 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 were involved in their assessments and care planning. They received personalised care that met their needs and ensured their safety. The registered manager regularly liaised with people to obtain their views on service delivery and people were supported in line with their wishes and choices. Staff were aware of people's individual differences and respected their cultural background, religious preferences and life choices. People were supported to have maximum choice and control of their lives and staff supported in the least restrictive way possible and in their best interests; the policies and systems in the service supported this practice.

Staff respected people's privacy and dignity, and enabled them to have as much independence as possible. They were aware of who was important in their lives and supported them to maintain relationships with friends and family to protect them from becoming socially isolated.

Staff had received training and there were processes in place should people need support with nutritional needs and/or help taking their medicines.

There were processes in place to record, review and manage complaints, accidents and incidents. Staff were knowledgeable in recognising signs of abuse and were aware of the local authority's safeguarding adults' procedures.

There were sufficient suitable, experienced and knowledgeable staff to support people. Staff received regular training to ensure their skills were up to date. The registered manager was in the process of recruiting care workers and safe recruitment practices were followed.

The registered manager was aware of their role and responsibilities, including their responsibility to notify the Care Quality Commission (CQC) of certain events and the duty of candour.

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 13/08/2018 and this is the first inspection.

Why we inspected

This was a planned inspection.

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?

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 ●

Lavender Care Agency 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 Care Act 2014.

Inspection team

This inspection was undertaken 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 and flats.

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 the service 48 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 12 December 2019 and ended on 17 December 2019. We visited the office location on 12 December 2019.

What we did before the inspection

We reviewed information we had received about the service, including notifications received about key events that occurred at the service. 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 this information to plan our inspection.

During the inspection

We spoke with one person and one relative about their experience of care provided. We spoke with the registered manager. We reviewed a range of records including two people's care records, the registered manager's staff file and a variety of records relating to the management of the service, including policies and procedures.

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 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

- There had been no safeguarding concerns raised since the service started.
- Staff had received training on safeguarding vulnerable adults. Staff were knowledgeable in recognising signs of possible abuse and were aware of the reporting procedures to the local authority safeguarding team. This helped to protect people from the risk of abuse.

Assessing risk, safety monitoring and management

- The registered manager worked with people to identify risks to their safety and welfare. This included risks at their home as well as in the community. Management plans were developed to reduce these risks and maintain a person's safety.

Staffing and recruitment

- There were sufficient staff to meet people's needs and provide them with the level of support they required.
- The registered manager was in the process of recruiting care workers to ensure they had sufficient staff in post should they support more people. Safe recruitment practices were followed to ensure people were supported by skilled and experienced care workers.

Using medicines safely

- At the time of our inspection no-one required support with their medicines. However, there were procedures in place should someone require this support and staff had received training on medicines management.

Preventing and controlling infection

- Staff had received training on infection prevention and control. Staff wore personal protective equipment (PPE), including gloves and aprons, when supporting people with their personal care to protect against the risk of infection and cross contamination.

Learning lessons when things go wrong

- There were processes in place to record and report incidents and accidents. The registered manager told us should an incident occur they would review all the information and ensure appropriate action was taken to ensure a person's health and safety. At the time of our inspection no incidents or accidents had occurred.

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 registered manager assessed people's needs in line with best practice guidance and the law. They used information from these assessments to develop care plans and ensure people received care in line with best practice standards. A relative told us, "When [the registered manager] came I was impressed. She was detailed in assessing [the person's] needs."

Staff support: induction, training, skills and experience

- People were supported by staff who had the knowledge and skills to undertake their role. Staff completed a variety of training courses to ensure their knowledge was up to date with best practice guidance.
- The registered manager had processes in place for when care workers were recruited to ensure they were adequately inducted and supported in their roles. This included opportunities for shadowing experienced staff and regular meetings.

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

- At the time of our inspection no-one required support with their nutritional needs. However, there were procedures in place should someone require this support and staff had received training on food hygiene and nutrition.

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

- At the time of our inspection staff did not directly support people with their healthcare needs. However, they had contact details for people's GP and told us they would encourage people to access healthcare professionals if they felt unwell.
- Staff were aware of people's current healthcare needs and which healthcare professionals were supporting them. They told us they checked for any signs of infection and would liaise with relevant healthcare professionals if they had any concerns, so the person could receive prompt treatment.
- Staff were knowledgeable about what to do in a medical emergency and how to obtain prompt support for the person.

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.

- Staff had received training on the MCA and adhered to the principles within the Act.
- Staff were clear that people had the capacity to make their own decisions and respected those decisions. Staff had discussions with people regarding appointing a Lasting Power of Attorney to ensure they had chosen who would make decisions on their behalf should their capacity diminish.

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

- Staff had completed training on equality and diversity.
- People confirmed they were well treated and part of the reason they had chosen to work with this service was due to the good manners shown by the registered manager. A relative told us, "I am at peace when [staff member] is with [their family member]. I can trust her...I don't want to lose her."
- Staff respected people's individual differences. The registered manager was aware of people's ethnicity, religious preferences and life choices and provided care and support in line with those.

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

- People were central to the care and support provided. The person and relative we spoke with confirmed they were involved in their care and their decisions were respected.
- The registered manager told us at times people requested additional support tasks and this was provided. We also saw that people's care plans included information to staff about providing support in line with people's choices. For example, the care plans instructed staff to follow the person's wishes about what tasks or activities they would like support with that day.

Respecting and promoting people's privacy, dignity and independence

- People's privacy and dignity was maintained. This included whilst supporting them in the community, as well as at their home.
- Staff respected people's independence and enabled them to do as much as possible for themselves. A relative said, "[The staff member] steps back so [their family member] can have their independence and privacy, whilst she still has her watchful eye [or safety]."

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 were fully involved throughout the assessment and care planning process. We saw that personalised care plans were in place which included a lot of detail about how a person wished to be supported. The registered manager told us, it was "one to one support based on their [people's] needs." Staff ensured they did not provide support without a person's permission and involved them throughout the process.

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.

- People using the service were able to communicate verbally in English and read written information. The registered manager told us should people have specific communication needs they would ensure information was made available in a format they understood.

Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities that are socially and culturally relevant to them

- Staff supported people to maintain relationships and avoid social isolation. Staff were aware of who was important in people's lives and supported them to maintain those friendships. When required, staff escorted people to meals out and to meet with their friends.

Improving care quality in response to complaints or concerns

- The registered manager regularly checked with people as to whether they had any concerns or complaints. However, at the time of the inspection no complaints had been made about the service.
- There were policies and procedures in place regarding the handling of complaints and information was provided to people about how to escalate their complaint if they had significant concerns about the service and how their complaint was managed.

End of life care and support

- At the time of inspection no one using the service required support with end of life care. Nevertheless the registered manager was aware of what to do if an unexpected sudden death occurred.

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.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; 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 was experienced and was aware of their role and responsibilities. This included their role at the service and their role as a registered manager with the Care Quality Commission (CQC). They were knowledgeable about what events required notification to the CQC and the duty of candour.
- The registered manager was clear about their role in reviewing the quality of the service and reviewing any potential risks to people's safety and welfare. They ensured people's care records were reviewed at regular intervals and as people's needs changed. From discussions with the registered manager it was clear they were passionate about providing a high quality personalised service.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people; engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- The registered manager had regular contact with people and their relatives and was able to act promptly on any feedback given about service provision. The support provided was individualised and was tailored to the person receiving care and their specific needs.
- At the time of the inspection the registered manager did not have formal processes in place to obtain feedback due to the size of the service. Nevertheless, they were able to describe to us the processes they would implement to obtain feedback from people and their relatives if the service supported more individuals. This included a regular programme of face to face quality monitoring visits and quality monitoring phone calls. We were satisfied the informal arrangements in place at the time of the inspection were effective in obtaining, reviewing and acting upon feedback from people and their relatives.

Continuous learning and improving care; working in partnership with others

- The registered manager stayed up to date with best practice guidance and any changes in legal requirements. This included checking publications about best practice guidance, learning from previous roles and meetings with the local authority. The registered manager also completed regular training and professional development courses. Knowledge gained through these processes was used to ensure continuous development and improvement of the service.