

Libra Domiciliary Care Ltd

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Inspection report

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Ratings

Overall rating for this service

Requires Improvement ●

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?

Requires Improvement ●

Summary of findings

Overall summary

The inspection took place on 09 May 2018 and was announced.

Libra Domiciliary Care Ltd provide care to people in their own homes. Fourteen people were in receipt of personal care at the time of our inspection.

This service is a domiciliary care agency. It provides personal care to people living in their own houses and flats in the community.

When we last inspected the service on 1 and 8 August 2017 we found improvements were required in all key questions. There were five breaches in the regulations and the provider was rated as 'Inadequate' and was placed in Special Measures. We added a condition to the provider's registration so that they were not able to take on new care packages until improvements were made. Following the last inspection, we asked the provider to complete an action plan to show what they would do, and by when, to improve the key questions Safe, Effective, Caring, Responsive and Well Led. At the time of our last inspection there were 20 people using the service.

During this inspection, we found sufficient action had been taken to address the previous breaches in the regulations and to improve so that the service was no longer rated inadequate. However, there continued to be areas needing improvement and the provider needed to ensure improvements were sustained once more people were using the service.

A registered manager was in post. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.

People received safe care and were supported by staff who knew how to protect them from harm. Staff had received training and understood who to report any concerns they had to. Risks assessments were completed for staff to refer to that had been reviewed and updated where appropriate. The registered manager monitored calls to ensure staff attended calls and that they had sufficient staff to meet people's needs. People's medicines and how staff supported them were reviewed by the registered manager to ensure people received the correct support. Staff recruitment included background checks so that the registered manager understood if staff were suitable to work at the service. Improvements needed to people's care were shared with staff for staff to implement them.

People were supported by staff that had access to supervision and training and understood how to support people in line with human rights. People were supported to maintain a healthy diet through the choices of meals and drinks staff offered them. Communication between staff enabled staff to support one another and share important information about people's care. Text messages and messages in care plans ensured

this happened. People were supported to access additional advice from healthcare professionals where this was relevant to them. People are supported to have maximum choice and control of their lives and staff support them in the least restrictive way possible; the policies and systems in the service support this practice.

People knew and liked the staff supporting them. Staff supported people to make decisions about their day to day care needs so that they were involved in their care. People were treated with dignity and respect. Staff understood what it meant to individual people in terms of maintain their dignity.

People were involved in discussions about their care so that their care was tailored to their own specific needs and preferences. Where changes were needed the registered manager worked with people to implement change. People understood how to complain and felt confident their concerns would be acted upon. The registered manager had a system in place for recording communication with people and the action taken to prevent a complaint from developing.

People were assured that if they called the administration office they could speak with the registered manager and make changes to their care. The registered manager had developed systems for communication and governance to improve people's care, but we could not yet test how the systems worked when the service operated normally and without restrictions in place. People and staff reported improvements to the service in how people's care was reviewed and monitored. The registered manager explained that since the last inspection they had invested time in developing links with other stakeholders to improve their knowledge and improve people's care. They had developed a partnership with a new training provider as well as HR Consultants so that that staff had the right training and that all HR processes were undertaken correctly. They had learnt from the last inspection and understood that some of their internal processes were not robust. They also signed up for a number of courses with the local authority aimed at Social Care providers to keep their knowledge up to date. We saw evidence for how the registered manager had improved their knowledge.

Further information is in the detailed findings below.

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.

People told us they felt safe supported by the staff who knew how to keep people safe from harm. People were supported by sufficient staff and call times were monitored to ensure staff attended and on time. People were supported by staff to take their medicines and records were completed by staff to record when medicines had been administered. Learning from people's care was shared with staff to improve people's care.

Is the service effective?

Good ●

The service was effective.

People were supported by staff who had access to training and supervision so that they provided people with the correct support. Staff understood people's care sought consent before providing care. People had access to choices about the meals and drinks staff provided. People were supported to access external health professionals to support their wellbeing.

Is the service caring?

Good ●

The service was caring.

People's needs were met by staff who they knew and liked. People were treated with dignity and respect.

Is the service responsive?

Good ●

The service was responsive.

People were supported to influence their care and receive care that suited their individual needs and which was reviewed. People understood how to complain if needed and felt assured their complaints would be dealt with.

Is the service well-led?

Requires Improvement ●

The service was not always well-led.

People and relatives spoke positively about the service and felt it

was well managed. The provider had systems in place to check and improve the quality of the service provided. The registered manager worked in partnership with other stakeholders. However we not yet confirm if improvements could be sustained.

Libra Domiciliary Care Ltd

Detailed findings

Background to this inspection

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, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

When we last inspected the service in August 2017, we rated the service as Inadequate and placed the service into special measures. We also placed a condition on their registration that restricted them from taking on any new packages of care. We undertook this inspection to see what progress had been made and whether the service needed to remain in special measures. We also considered whether the condition on placements needed to remain in place.

Inspection site visit activity took place on 09 May 2018. The visit to the office was to speak with the registered manager and other office based staff as well as to review care records and other documents. We made telephone calls up until and including 20 May 2018. The inspection team consisted of one inspector.

We gave the service 48 hours' notice of the inspection visit because it is small and the manager is often out of the office supporting staff or providing care. We needed to be sure that they would be in.

We reviewed the information we held about the home and looked at the notifications they had sent us. A notification is information about important events which the provider is required to send us by law.

During the inspection, we spoke with two people and three relatives of people receiving support. We spoke with two members of staff as well as the registered manager. We looked at aspects of four people's care records and medicines records. We looked at staff rotas, compliments and quality checks completed on behalf of the registered manager.

Is the service safe?

Our findings

We last inspected this service in August 2017 and rated this section as Inadequate. At that inspection we found that people's calls were often missed or delayed and staff did not stay for the duration of calls. We also found people did not receive their medicines safely. At this inspection we found improvements had been made and people felt confident staff attended at the agreed time in order to meet their care and support needs.

People told us they were safe around staff. One person told us they knew the staff well and felt safe with staff in their home. A relative we spoke with also told us they felt their family member was safe in the company of staff supporting them.

Staff we spoke with told us they understood how to keep people safe. One staff member told us if they were concerned, "I would speak with [Registered manager] and if nothing happened I know who else to call but I know [Registered manager] would deal with it." We spoke with the registered manager who explained staff had been trained in keeping people safe. They told us they knew they understood their obligation and how to report concerns if they had any.

At the last inspection we found people's risk assessments were not always completed fully and were not reviewed. At this inspection we found improvements. Staff we spoke with understood people's health care needs and their associated risks to health. For example one staff member told us how they always ensured people with diabetes were left with a snack or a drink in case they needed it. Staff told us they could refer to care plans for guidance or ask the registered manager if they needed. We reviewed four care plans and saw the care plans provided staff with detailed information about people's health care needs. Risk assessments were comprehensive and up to date to provide staff information about how to mitigate the risk to people.

People and their families told us they felt confident staff would attend calls and that the correct number of staff attended the call. For example, when they required support from two staff, they both attended so that it was possible to care for the person safely. The registered manager ensured there were enough staff to meet people's needs. They told us they reviewed staffing alongside people's needs and they told us they currently ran at a surplus. Staff we spoke to told us staffing numbers were adequate for people's needs.

People told us staff attended on time and ensured all the things they needed support with were completed to their satisfaction. We saw daily logs were completed that detailed when staff arrived and left and these had been reviewed by the registered manager and action taken as appropriate. For example, one person's care was reviewed as call times reduced because they did not need it. We found staffing levels to support people were reviewed so that people received care safely.

At our last inspection we found people were not supported safely with their medicines. Some records were missing and times for people's medicines were not included. Some people required time sensitive medicines. At this inspection we found improvements and people received the support they needed to have their medicines in a safe manner and at the required times. People told us they were supported with their

medicines and that staff arrived on time to ensure they got these at the time they needed. One relative told us they family member required support with creams and that staff always ensured this was done. We saw Medicine Administration Charts (MARS) were completed and reviewed by the registered manager regularly. We also saw the registered manager now included times medicines were to be administered so that it was clearer to understand whether people received the correct support.

We saw the registered manager had a system in place for recruiting staff that included a Disclosure and Barring Service check (this check helps employers make safer recruitment decisions and prevent unsuitable people from working with vulnerable groups). We reviewed three staff files and saw references and background checks had been completed prior to the staff commencing work with the service. We spoke with two staff who both confirmed the checks were completed prior to staff starting work.

The registered manager had a system in place for learning lessons went things went wrong so that people's care could be improved. We looked at a review of concerns that had been shared with the registered manager and saw that the registered manager had completed an investigation and updated staff about the learning from that incident. One staff member told us if the registered manager needed to update staff they would call or text them so they had the information needed to support people correctly.

Is the service effective?

Our findings

We last inspected this service in August 2017 and rated this section as Requires improvement. At that inspection we found staff training did not equip them to support people. At this inspection we found there were improvements because staff received supervision and support and their training needs and performance was monitored through spot checks.

People using the service were from a range of different cultural backgrounds. The registered manager explained that they had employed staff from different cultural backgrounds and this diversity helped them understand people's needs and provide support that met their needs. They explained they tried to provide care that was about meeting the person's overall needs so they were not disadvantaged and this supported their human rights. For example, people that required help with specific haircare and skincare were supported to achieve this. One staff member told us about how they supported people and understood people needed high quality care regardless of their background.

People told us they felt confident that staff supported them appropriately. One person told us they felt staff knew what they were doing. The registered manager told us all new staff completed an induction and during this time they accompanied experienced staff to understand how to support people correctly. The induction was in line with the Care Certificate. We saw staff were supported to develop the skills needed to support people. Staff we spoke with told us they received training and support to care for people. We saw that staff had regular training scheduled which was reviewed. People told us staff were sometimes supervised during spot checks to ensure staff completed care correctly. The registered manager told us training was now reviewed and updated on their electronic database so they were prompted when further training for staff was due. They told us this enabled them to ensure staff supported people correctly.

People told us they received support to maintain a healthy diet. One person told us, "They always get me something ready." People we spoke with told us staff asked them about what they would like. One person told us they regularly had the same meal as this was their preference but that staff would always provide a choice. Staff we spoke with told us they always ensured people had access to snack or a drink. One staff member told, "Even if they don't need a meal we always ask if they need a drink or a snack."

Staff we spoke with told us communication with other staff and the registered manager was good. One staff member told us, "If I need to speak to other staff, I can leave a note in the care plan. If not I can speak with the registered manager and a message will go out to the other staff." We saw examples of messages sent to staff and saw there a system in place for ensuring staff worked together.

People told us they felt assured staff would support them if they needed help to access other healthcare support. One person told us staff helped them with doctors' appointments and with their prescriptions when needed. During our inspection we saw administrative staff speak with district nurses and ensured people received the support they needed. We saw the registered manager had a system for recording contact with staff about people's health so that people received the support they needed.

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 told us staff supported them to make decisions. One person told us, "They always ask me my permission before they do anything." Staff we spoke with told us they had received training and understood the MCA. They told us if they were concerned about a person's ability to make a decision they would speak with their family and the registered manager. The registered manager told us they did not have anybody they supported at present that was supervised by the Court of Protection but understood the process if they were. Care staff understood how to care for people in line with legislation and guidance.

Is the service caring?

Our findings

We last inspected the service in August 2017 and rated this section as Requires Improvement. At that inspection we found people had a number of different staff supporting them and that staff didn't always understand their needs. At this inspection we found things had improved because people had developed an understanding with staff they saw regularly.

People told us staff were caring and they liked the staff supporting them. One person told us, "They're all lovely." Another person told us, "They're good." People told us they were treated with kindness and compassion. Staff we spoke with could explain to us people's individual requirements that demonstrated how they understood how to care for people. One staff member told us about how a person liked their furniture in a particular way and how another person preferred staff to be mindful of the paintwork in their house. People felt staff respected their wishes.

People told us staff always asked them if they alright and what they needed when they arrived. One person told us, "They always ask if I need anything else." A relative we spoke with told us, "They do anything we ask." Staff could explain to us how they supported people that took into consideration people's cultural and religious beliefs. Some people that were supported had specific language requirements and staff explained how they worked with people's families to include them in their care and that after some time communication with the person became easier. People were supported to express their views and be involved in making day to day decisions about their care.

One person told us staff always respected their privacy. They told us, "Whenever I need to change, they [staff] always step outside and wait for me to finish before coming in." Another person told us, staff were always very respectful in how they spoke with them. One relative told us staff were also respectful of their home and belongings, they told us, "We asked them to cover their shoes [with shoe covers] in the house and it was no problem." Staff we spoke with also told us about practical ways in which they supported people such as ensuring curtains were closed when people received personal care. They told us they had received training and got to know people's needs well over time. People and their families were supported by staff that helped maintain their privacy and independence.

Is the service responsive?

Our findings

We last inspected the service in August 2017 and rated this section as Requires Improvement. At that inspection we found people raised complaints but that their complaints were not acted upon. We also found people did not have care that was based on their needs. At this inspection we found things had improved because people felt assured that their complaints would be heard and responded to.

People told us they were able to share with the registered manager how they wanted their care delivered. One person we spoke with told us they spoke with either the manager or the office based staff quite regularly and that they could make any changes they needed. One relative told us they had spoken with the registered manager about their family members timing of calls. They told us their family member had a specific need with respect to the timing of evening calls and since that had requested this, this had been undertaken.

People and their families told us they were now more involved in planning people's care. They told us they did this by being involved in review meetings. We saw in care plans, that they detailed people's histories and backgrounds so that staff knew how to support people. For example, one person required support with the skincare and staff we spoke with told us how they undertook this. We saw from reading care plans and speaking with staff that people now received support that was individual to their needs.

People told us they had not needed to complain in the months since the last inspection. One person told us, "I've got no complaints. It's a lot better now." At the last inspection, people reported that the registered manager never got back to people with an update. At this inspection we found the registered manager listened to people and acted on their feedback.

People told us they felt able to speak with either staff or the registered manager before things developed into a complaint. We saw the registered manager had a system in place for recording and acknowledging complaints and low level issues people wanted improved. Whilst the registered provider did not have any complaints, they kept a communication log for all communication they had with people. This detailed what people had called about and the action taken.

Is the service well-led?

Our findings

We last inspected this service in August 2017 and rated this section as Inadequate because we could not find evidence of any systems for how the registered manager assured themselves that the service provided high quality care. At this inspection we found there were improvements but we could not yet be assured that these could be sustained because the service had operated with reduced numbers of care packages. In addition there had been insufficient time to demonstrate that the revised systems and processes had been embedded, so that improvements could be sustained and further developed.

People we spoke with knew the registered manager and understood how they could be contacted. One person told us, "I can talk to [Registered Manager]." People we spoke with told us they felt able to contact the registered manager and discuss their care. One relative told us they had contacted the registered manager to make changes to their family member's call times and this had been completed to their satisfaction. People told us the care they received reflected their preferences. The registered manager explained they spoke with people and their families regularly to understand if people were happy with their care. We found the registered manager worked with staff to provide care that was personal to people's needs.

There was a registered manager in place who was present during our inspection. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.

Staff we spoke with told us their work environment had improved since the last inspection. One staff member told us, "It's a lot better now." They told us communication and systems to support staff had improved. They told us they received their rotas in advance so that any changes needed could be made in time. They told us that supervision was regular and that they benefitted from spending time in the administrative office to understand the systems for updating people's care. Staff we spoke with told us they felt able to contact the registered manager and discuss any concerns or queries they may have.

At the last inspection we found governance structures were not in place and communication with staff was not always clear which meant some people had a negative experience of care. At this inspection we found the although the registered manager had worked to develop clear governance structures and improve communication with staff we can't yet be assured that the systems are embedded given the short period of time since the last inspection. The registered manager explained that since the last inspection they had moved offices and made changes to the support team they worked with. There had been a management restructure and specialist advice from stakeholders had been sought. They told us this gave them an opportunity to make a fresh start and review things. We saw the registered manager had a better understanding of people's needs and had systems in place to review and update people's care. We saw they fully utilised their care planning software so that they were alerted of review dates for care plan reviews as well as risk assessments which meant that people's care was reviewed frequently. We saw that care plans

now reflected people's up to date care needs to guide staff on how best to support people.

At the last inspection we found people did not find the registered manager willing to engage with them and hear their thoughts about their care. At this inspection people told us things had improved and that people were encouraged to feedback and be involved in influencing how the service provided care. One person told us, "Someone calls from the office to check everything's ok." A relative we spoke to told us, "At first they had teething problems, but everything's ok now. My [family member] gets the care they need and I can call the office no problem." A staff member we spoke to told us the office based staff regularly called people to check their care package was running smoothly and if things needed adjusting, changes could be made. A group text message was then sent to ensure this information was communicated to staff. We saw examples of text messages sent to staff to update them. People were therefore engaged in shaping care the service provided.

The registered manager explained that since the last inspection they had invested time in developing links with other stakeholders to improve their knowledge and improve people's care. They told us they had developed a partnership with a new training provider as well as HR Consultants so that that staff had the right training and that all HR processes were undertaken correctly. They told us they had learnt from the last inspection and understood that some of their internal processes were not robust. They told us they had also signed up for a number of courses with the local authority aimed at Social Care providers to keep their knowledge up to date. We saw evidence of how the registered manager had improved their knowledge by working in partnership with other stakeholders.