

# Lakeland Care & Support Services Limited

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## 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	

### Overall summary

We carried out this announced inspection on 15 May 2015. We last inspected this service on 12 October 2012. At that inspection we found that the provider was meeting all of the regulations that we assessed.

The service moved to a new address in November 2013. This meant the provider had to apply to change their registration with us. We carried out an assessment of the service as part of the registration application and found that the service was likely to be safe, effective, caring, responsive and well-led.

Lakeland Care and Support Services Limited, (Lakeland Care), provides personal care to people living in their own homes. The service is managed from offices approximately one mile from Ulverston in South Cumbria. The agency primarily provides support to people living in the South Lakes and Furness areas of Cumbria.

There was a registered manager employed at the service. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like

# Summary of findings

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 a high quality of care that met their needs and enhanced their quality of life. They were placed at the centre of their care and made choices about the support they received. Care staff were kind and caring while supporting people and treated them and their homes with respect. People were supported to carry out tasks for themselves and to maintain their independence. They were supported to remain in their homes and valued the care they received.

People were safe receiving care from this service. Staff were trained to give them the skills and knowledge to

deliver care safely and to a high standard. Care staff knew how to identify and report concerns about a person’s safety. This helped to protect people from the risk of abuse.

The registered manager used good systems to share information with people to help them to stay safe in their homes.

The service was well managed. New staff were checked to make sure they were safe and suitable to work in people’s homes. People were asked for their views of the care they received and their experiences were used to improve the quality of the service. The registered manager used thorough systems to assess the quality of the service. Where an aspect of the delivery of the service required improving, this was identified and action was taken.

# Summary of findings

## 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.

Good

The registered manager used good systems to support people to remain safe in their homes.

Care staff knew how to identify and report abuse; this helped to protect people from harm.

The registered manager had systems in place to manage foreseeable emergencies to ensure people were safe.

### Is the service effective?

The service was effective.

Good

Care staff completed training to give them the skills and knowledge to support people.

The registered manager was knowledgeable about the Mental Capacity Act 2005. They understood their responsibilities to protect the rights of people who were not able to make important decisions about their lives.

### Is the service caring?

The service was caring.

Good

Staff were caring and kind and treated people and their families with respect.

People were supported to remain in their homes and to maintain their independence.

### Is the service responsive?

The service was responsive.

Good

People received a high quality of care that enhanced their quality of life. People were placed at the centre of their care and were included in planning their care and in all decisions about the support they received.

The registered manager had a procedure for receiving and handling complaints. People could be confident concerns would be looked into and action taken as required.

### Is the service well-led?

The service was well-led.

Good

People knew the senior managers in the service and how they could contact them.

The registered provider set high standards for staff to work to and carried out checks to ensure these were met.

People were asked for their views about the service. People's experiences were used to improve the service provided to them.

# Lakeland Care & Support Services Limited

## 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.

The inspection took place on 15 May 2015 and was announced. We gave the provider 48 hours' notice because the location provides a domiciliary care service and we wanted to make sure that the registered manager would be available to speak with us when we visited the service.

The inspection was carried out by one adult social care inspector 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.

Before the inspection, the provider completed a Provider Information Return (PIR). This is a form that asks the

provider to give some key information about the service, what the service does well and improvements they plan to make. We reviewed the information we held about the service, including the information in the PIR, before we visited the service. We also contacted the local authority commissioning and social work teams and local health care professionals for their views of the service.

The inspector visited the agency offices on 15 May 2015 and looked at the care records for five people who used the service and the recruitment and training records for four care staff. We also looked at records relating to how complaints were managed and how the provider checked the quality of the service provided. Before we carried out our inspection we sent questionnaires to 49 people who used the service and to 30 staff to gather their views. We also spoke with 15 people who used the service and nine relatives on the telephone.

At our visit to the agency offices we spoke with the registered manager, care manager and care, training and recruitment manager. As part of our inspection we also contacted three staff by telephone.

# Is the service safe?

## Our findings

Everyone we spoke with told us that they were confident that people were safe receiving support from this service. People who used the service told us, "I feel totally safe, I have no concerns" and said, "The girls, [care staff] who come are lovely, I feel very safe with them". Relatives we spoke with said, "I feel [my relative] is safe with all the staff, I even go out while they are here now, I wouldn't do that if I wasn't sure [my relative] was safe". Another relative told us, "We feel so safe with them [care staff] coming".

Care staff told us that they knew how to identify and report abuse and said that they had received training in how to provide people's care in a safe way. This was confirmed in the training records we looked at.

The registered manager had good processes in place to support people to remain safe in their homes. One person who used the service had been subject to an attempted fraud. We saw that the registered manager had taken all appropriate steps to support and protect the individual. They had then used the service's newsletter to remind other people about the possible risk of fraud in the community and the steps people could take to protect themselves.

Some people who used the service had a key safe, used by staff from the agency and by visiting health care professionals to access their homes. We saw that the registered manager had also used the agency newsletter to remind people to regularly change the number to access the key safe, to try to ensure the security of their property. This showed that the registered manager actively supported people to maintain their safety.

Each person had a care plan which detailed the support they needed and how they wanted this to be provided. We saw that potential hazards to people's safety were recorded

in their care records. The records gave staff clear information about any hazards and the actions they had to take to manage any risk to themselves or the person they were supporting.

There were procedures for staff to follow in the event of emergencies, including if they were unable to gain access to a person's home to deliver planned care. We looked at the records of the actions taken when staff had reported they were not able to gain entry to a person's home. We saw that a senior person had maintained oversight of each incident until they were sure that the individual was safe.

There were enough staff to support people. People who used the service told us that they liked the staff who supported them. They said they usually received care from a team of staff who they knew and who were knowledgeable about the support they required. Some people told us that there had been an issue with their care being provided by a lot of different care staff. They told us that the registered manager had taken steps to address this and had revised the staff rotas so that they usually received care from a regular team of staff.

We look at the recruitment records for four care staff. We saw that all the checks required by law had been carried out before new staff were employed to work at the service. People who used the service could be confident that staff were recruited properly and checked to ensure that they were safe and suitable to work in people's homes.

Some people who received support from the service required assistance in managing their medicines. We saw that the care staff had received training in the safe handling of medicines. Individuals' care records showed the support that they needed from the care staff and records were kept of the assistance that staff had provided to people. People who used the service received their medicines safely and as prescribed by their doctors.

# Is the service effective?

## Our findings

People who used this service and the social care professionals we contacted told us that the staff employed by this service were trained to meet people's needs. One person who used the service told us, "The girls [care workers] that come are kind and well trained", another person said, "The staff are very well trained ... they are always on training". A social care professional told us, "The staff are well trained and have a positive approach to all customers".

The care staff we contacted told us that they received training to meet people's needs and to ensure their safety. One care worker said, "We get excellent training".

We looked at the records of training that the care staff had completed. We found that all staff completed a range of training before they worked in people's homes. The training included areas such as maintaining people's safety, confidentiality, food safety and treating people with respect. We saw that the care staff were also supported to complete qualifications relevant to their role.

The care staff told us that they felt well supported by the management team in the agency. They said they had regular individual and team meetings with their line manager to discuss their practice. We saw that a member of the management team also observed staff as they worked in people's homes to assess their practice and competency. This helped the managers to be assured that care staff were providing a good quality of care.

People told us that the staff asked their permission and agreement before providing their support. One person said,

"They always ask what I want" and another person told us, "They do what I want, they always ask first". People told us that they could refuse any part of their planned care if they wished and said the staff respected the decisions they made.

Some people who used this service required support to make important decisions about their lives. We saw that the registered manager of the service was very knowledgeable about the Mental Capacity Act 2005 and about good practice in supporting people who were living with dementia. We saw that strategies were identified in people's care records to guide staff on how to support individuals in making choices for themselves.

Most of the people we spoke with did not require support with eating or drinking. We saw that where people needed encouragement to enjoy their meals or support with meal preparation, this was detailed in their care plan. The care records we looked at included strategies for care staff to follow to support people living with dementia to make choices about their meals. This supported people to maintain control over their lives.

None of the people we spoke with required support from the care staff to arrange or attend health care appointments. The care records we looked at showed that care staff had taken appropriate and prompt action when they were concerned about the health of a person they were supporting. We saw that the care staff had, with the individual's agreement, contacted a member of the agency's management team, who arranged for the individual's doctor to visit them. This showed that people were supported to access health services.

# Is the service caring?

## Our findings

People who used the service and the relatives we spoke with told us that the staff who worked at the agency were “caring” and “kind”. One person told us, “The staff are very caring” and another person said, “I’ve had the same girls, [care workers] for three years, they are all very kind”.

People told us that they received a good standard of care from the service. One person said, “I am very happy with the standard of care, there are other agencies locally but I wouldn’t entertain them”.

People told us that they were asked for their views about the support they received and included in decisions about their care. One person told us, “I was asked what help I wanted and it’s all written down”.

Everyone we spoke with told us that the care staff took appropriate action to maintain individuals’ privacy and dignity. They told us that the staff were “very careful” about this. One person said, “They [care staff] keep [my relative’s] dignity … [my relative] has hygiene needs now and it

would be so easy to be undignified, but the carers [care staff] are very good”. Another person told us, “The girls [care staff] are very careful, they check the curtains are closed before they help me to bed”.

People told us that the staff who visited them helped them to stay in their own homes and said this was very important to them. They told us that they valued the support they received and said, “I couldn’t do without them [care staff] and “We’d be lost without the girls [care staff]”.

We saw that people’s care records included information about the tasks that they could carry out themselves and those that they needed support to carry out. We saw that there was information for staff in how to promote people’s independence and how to help people to make choices about their care and their lives. The care records we looked at showed that people had gained confidence to carry out tasks themselves supported by the care staff. Everyone we contacted said that the support they received helped them to maintain their independence.

Everyone we spoke with told us that the staff who visited their homes respected people’s confidentiality. One person said, “They don’t discuss anyone else with you, everything is very private”.

# Is the service responsive?

## Our findings

People told us that this service was very responsive to their needs and wishes. One person said, "The staff go that extra mile, nothing is too much trouble for them". Another person told us, "If this is marks out of 100 they get 120, they are marvellous".

Family members we spoke with told us that the support provided by this service had improved the quality of life their relatives experienced. One told us, "[My relative] looks forward to the staff coming, they have changed [my relative's] life". Another relative told us, "This really is a marvellous service, they have really worked with us as a family to plan [My relative's] support. [My Relative] has been supported so that they can do more for themselves now and we've seen a huge change in their mood, [my relative] is happy at home now".

The care professionals we spoke with told us that the service focused on providing support that placed the individual at the centre of their care. One care professional told us, "I work with many domiciliary care providers and Lakeland Care stand out as a company whose emphasis is entirely on providing the best possible experience for their service users".

People told us that they were included in planning the support they received and in decisions about their care. They said that they had told the service what support they required and this was provided. People told us that they had a care plan that set out the support they required. They said their care plans were reviewed regularly and that they were involved in this process. One person told us, "There is a care plan in the house. I was asked what I wanted and it's all in there. It gets updated regularly". This meant that care staff had information in the individual's home to guide their support.

We looked at the care records for five people. We saw these were detailed and included the choices people had made about their support. The care plans included information for staff to help them engage with people such as details of the person's working life and their families. Staff we spoke with told us this was useful as it helped them to engage people in conversation as they worked with them.

The records we looked at showed that the service responded appropriately if a person was unwell and their care visit needed to be extended for longer than the planned time. We saw that the care worker, or a member of the office management team, had stayed with a person when they were unwell to support them to access health care support.

The registered provider had a formal procedure for receiving and handling complaints. A copy of this was given to people who used the service. Everyone we spoke with said they knew how they could raise a concern about the service. People told us that they had received a copy of the complaints procedure. We saw that the newsletter, sent to people who used the service, also reminded people about how they could complain.

Most of the people we spoke with said that they had not needed to make a complaint as they were happy with the service they received. One person said "I have never had to complain but I would know how, the office are very good at sorting things out". Another person said, "They are not perfect, mistakes can happen, but if I have any concerns I just ring the office and it's sorted out straight away, you can't ask for more than that".

People who had raised concerns with the agency told us that they were happy with how their concern was handled. They said that their concerns had been treated confidentially and resolved promptly. One person told us, "If I ring and say 'Don't send that one [care worker] again', they don't and it goes no further, no one knows what you have said, they are good like that".

We looked at how complaints were managed by the service. We saw that a senior person in the agency investigated any complaints or concerns received. The records we looked at showed that the person who had raised the concern was informed of the findings of the investigation and told of the action that had been taken in response. We saw that where the complaint investigation found that people had not received a satisfactory standard of service, the registered manager apologised for this and appropriate action had been taken to address the issues found. People who used this service and their families could be confident that any complaints they made would be investigated thoroughly and that action would be taken to address any concerns found.

# Is the service well-led?

## Our findings

People who used the service made many positive comments about the management team employed by the agency. People told us they felt the service was well managed and said they knew how they could contact a senior person in the agency if they needed to.

The registered manager was supported by a skilled and experienced team of managers to ensure the effective management of the service. People we spoke with told us that they knew the senior managers and told us that they were helpful if they had to raise any concerns. One person told us, "The office [staff] are very good at sorting things out. Another person said, "If anything is wrong I just phone up and they sort it out quickly".

Care staff we spoke with told us that the managers of the service set high standards. They told us that the managers and senior care staff carried out checks to ensure the service was delivered to a high standard. People who used the service confirmed this. One person said "The manager has been out to check on things, I would recommend them to anyone". Another person told us, "There are check visits from the office ... I would ring up if anything was wrong but I have had no problems".

The care staff told us that they felt well supported by the managers in the agency. One care worker told us, "Working for this company is brilliant compared to the last company I worked for. The managers are really supportive and are on the other end of the phone whenever we need them. The clients are generally happy with the service and any problems are dealt with swiftly".

Care professionals we contacted told us that they felt the service was well managed to ensure people received a good standard of care. One told us, "This [Lakeland Care and Support Services Limited] is a pro-active and well managed service which offers good care to all customers across a range of needs". Another care professional said, "They are constantly reviewing the service they have provided and have a culture of continuous improvement".

We saw that the registered manager used a range of formal systems to monitor the quality of the service. People who used the agency and their relatives were asked to complete quality surveys to share their views of the service with the registered manager. We saw that people's experiences were used to improve the service. Issues raised in the quality surveys were addressed and the action that had been taken was shared with people who used the service through the agency newsletter.

We saw that the quality survey carried out in December 2014 had identified that people had been receiving care from a lot of different care staff which had impacted on their experience of using the service. The registered manager had identified this concern and had revised staff rotas to ensure people received care from a team of staff who they knew. One person told us, "There was an issue when the times of visits were variable ... but now they have more staff and it's improved". This showed that the registered manager took action when they identified areas where the service required improving.