

Local Care Force LLP

Local Care Force

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

This was an announced inspection carried out on the 8 August 2016. At the last inspection in July 2013 we found the provider met the regulations we looked at.

Local Care Force provides services to meet the needs of individuals who live in their own homes and need support or care.

There was a registered manager 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 and associated Regulations about how the service is run.

The person currently using the service told us they were happy with the support they received from the service and were treated well. They told us they felt safe with the staff and the care they were provided with. Staff understood how to keep people safe and told us any potential risks were identified. We found there were systems in place to protect people from the risk of harm and appropriate recruitment procedures were in place.

The provider had policies and procedures relating to the safe administration of medication in people's own home which gave guidance to staff on their roles and responsibilities. Nutritional and health care needs were met.

There were policies and procedures in place in relation to the Mental Capacity Act 2005 (MCA) and staff showed they understood how to ensure their practice was in line with the MCA.

Care and support was provided by appropriately trained staff. Staff received support to help them understand how to deliver good care.

Systems were in place to monitor the quality and safety of service provision and we found there were appropriate systems in place for the management of complaints.

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.

Staff had a good understanding of safeguarding and how to appropriately report abuse. There was a robust recruitment policy in place which was adhered to.

Risk was assessed and managed in order to keep people safe.

There were appropriate arrangements for the safe handling of medicines.

Is the service effective?

Good ●

The service was effective.

Staff training and supervision equipped staff with the knowledge and skills to support people safely.

The registered manager and staff had completed training in respect of the Mental Capacity Act 2005 and understood their responsibilities under the Act.

The service provided good support with meals and healthcare when required.

Is the service caring?

Good ●

The service was caring.

There was evidence of good involvement in making decisions about care and support they received.

Support was provided by staff who were kind and respectful of privacy and dignity.

Staff knew the person they were supporting well and were confident good care was delivered.

Is the service responsive?

Good ●

The service was responsive.

Support needs were assessed and plans identified how care should be delivered.

There was evidence that individual choices and preferences were discussed and identified with the person who used the service.

The service had systems in place to manage complaints.

Is the service well-led?

The service was well- led.

The management team were familiar with individual care needs and knew the person who used the service well.

Staff said they felt well supported by the management team.

There were effective systems in place to monitor and improve the quality of the service provided.

Good ●

Local Care Force

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.

This inspection took place on 8 August 2016 and was announced. The provider was given 48 hours notice because the location provides a domiciliary care service; we needed to be sure that someone would be in the office. One adult social care inspector carried out the inspection.

At the time of our inspection there was one person receiving the regulated activity of personal care from the service. As part of the inspection we spoke by telephone to this person and also spoke by telephone with two care staff. On the day of the inspection we spoke with the home care manager and the registered manager at the location office. The registered manager told us they did not intend to extend the service further at the present time. We spent time looking at documents and records related to people's care and the management of the service. We looked in detail at the support plan and associated records of the person who currently used the service.

Before our inspection, we reviewed all the information we held about the service, including previous inspection reports and statutory notifications. 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 also contacted the local Healthwatch. Healthwatch feedback stated they had no comments or concerns. Healthwatch is an independent consumer champion that gathers and represents the views of the public about health and social care services in England.

Is the service safe?

Our findings

The person who used the service told us they felt very safe with their carers and enjoyed a good relationship with them. They told us, "I am most definitely safe and feel in good hands; I would say if I didn't feel safe and they would sort it out." They had no concerns that care staff were not careful and respectful of their home security and possessions. They said, "I trust them very much."

The support plan we looked at showed risks were assessed appropriately and restrictions were minimised to make sure the person who used the service had the freedom and choice they needed to live their life to the full. Staff were aware of risk management plans and said these were updated to ensure current needs were met. The person who used the service told us they had been involved in the drawing up of the risk management plans and had agreed on what was in place.

The provider had a policy in place for safeguarding people from abuse. This policy provided guidance for staff on how to detect different types of abuse and how to report abuse. Staff had received training in the safeguarding of vulnerable adults and the records confirmed this. The staff we spoke with were able to describe different types of abuse and were clear on how to report concerns outside of the service if they needed to. Staff felt confident any concerns they reported would be addressed by the management team.

We looked at recruitment records of four care staff. We saw appropriate recruitment and identification checks were undertaken before staff began work. These checks helped to make sure job applicants were suitable to work with vulnerable people and included Disclosure and Barring Service (DBS) checks. The DBS is a national agency that holds information about criminal records and persons who are barred from working with vulnerable people.

We found staffing levels were sufficient to meet the needs of people who used the service. On the day of our visit the agency was providing support to only one person. The registered manager told us the staffing levels agreed for this person's needs were being complied with, and this included the skill mix of staff. The person who used the service said they received support from a consistent team of staff. They described them as punctual and reliable. They said, "I am very pleased with them, I know them all and they know me." The registered manager said if they had to introduce any new staff to the person who used the service; this would be done by agreement with the person. The person who used the service said they had a system in place to give feedback on any new staff to the registered manager. They said, "I always report in on how they have gone on." They said there had been times in the past when they hadn't got on with a staff member and the registered manager had changed things to their satisfaction.

The provider had policies and procedures relating to the safe administration of medication in people's own homes which gave guidance to staff on their roles and responsibilities. The registered manager told us staff were not allowed to assist people with their medicines until they had completed appropriate training and their competency checked. We saw staff training was up to date. At the time of our visit the service was supporting one person with their medication. We saw detailed support plans were in place to show how the person liked to take their medication. We saw appropriate arrangements were in place in relation to the

recording of medicines. For recording the administration of medicines, medicine administration records (MARs) were used. We noted another organisation who provided care and support took responsibility for the ordering and auditing of the person's medication. We recommended the provider included these arrangements in their support plan for medication administration so that all staff had clear guidance on their responsibilities in this area. The person who used the service had arranged how their medication administration was to be recorded and e mail documentation between the person and the registered manager showed how this had been agreed. The person who used the service said everything was going well with medication and they were pleased the two organisations were working together to complete the MAR. Staff we spoke with were aware of their responsibilities regarding the medication assistance needed.

Staff said they felt confident and trained to deal with emergencies. They said they would have no hesitation in calling a GP or an ambulance if they thought this was needed. The home care manager told us the provider operated a 24 hour on call system. They said there was a dedicated on-call team available to provide assistance and support to staff at all times.

Is the service effective?

Our findings

The person we spoke with said staff knew how to care for them and had the right skills and abilities to do their jobs. They said, "Yes, they are all well trained and professional."

Staff said they received training that equipped them to carry out their work effectively. Staff's comments included; "It's been very good, reliable, informative training; I have enjoyed it and learnt from it." Another staff member said, "The training is first class, anything you ask for they arrange."

Staff said they received a good induction which had prepared them well for their role. The registered manager told us they had introduced the Care Certificate for new staff. The Care Certificate is an identified set of standards that health and social care workers adhere to in their daily working life.

We looked at staff training records which showed staff had completed a range of training sessions and these were updated annually to ensure staff's practice remained up to date. These included moving and handling, medication awareness, health and safety, basic first aid and food hygiene.

During our inspection we spoke with members of staff and looked at staff files to assess how staff were supported to fulfil their roles and responsibilities. Records showed staff received regular supervision and appraisal which gave them an opportunity to discuss their roles and options for development. We looked at staff records which confirmed there were systems in place to ensure staff received supervision and appraisal several times a year. Staff we spoke with told us they were well supported by the management team. One staff member said, "We speak at least weekly."

The Mental Capacity Act (2005) (MCA) provides a legal framework for acting and making decisions on behalf of people who lack the mental capacity to make specific decisions for themselves. Staff we spoke with understood their obligations with respect to people's choices and the need to ask for consent prior to carrying out any care tasks. Staff were clear when people had the mental capacity to make their own decisions, this would be respected. The person who used the service told us their decisions and choices were well respected by the staff. They said they were always asked for their consent and felt in control of their own care and support.

The staff we spoke with told us they had completed MCA training and the records we looked at confirmed this was done at induction and as part of safeguarding training. The registered manager said they had recognised the need for MCA training to be delivered as a separate course and showed us the course outline of the MCA training to be introduced in the coming months.

The person we spoke with told us they received the support they needed with health care needs and staff would support them to manage any appointments if needed. They told us they received good support to manage their nutritional needs and staff cooked and prepared meals under their direction. They said staff were good cooks and meals were prepared well. We saw in the person's support plan there was good detailed information on their preferences, likes and dislikes and the support they needed at meal times. This

information was person centred, individualised and ensured the person's safety and cultural needs were respected.

Is the service caring?

Our findings

The person who used the service told us they had a great relationship with the staff team. They said they were kind, supportive, caring and decent. They said they were very happy with the staff team who supported them and wouldn't change anything. They told us, "They are really good, we get on so well, they turn up on time, I really like them all."

We saw from a compliment received a person who previously used the service had said, "Brilliant, great team, going the extra mile. [Name of care staff] is fantastic with mum; outstanding care that she provides."

Staff spoke of the importance of maintaining independence for the person who used the service. They described the way they did this. One staff member said, "This is a very important aspect of [name of person's] care." Staff we spoke with demonstrated they knew the person's individual likes, dislikes and care preferences. It was clear they had developed good relationships with the person and spoke warmly about them. Staff said they provided good care and gave examples of how they ensured privacy and dignity were respected. The person who used the service said they had no concerns about their privacy and dignity and felt this was well respected by the staff.

The person who used the service was supported by a small staff team who knew the person's needs well. Rotas we looked at showed the staff supplied were regular, consistent staff who had got to know the person and their needs.

Support plan records we looked at showed the person was able to express their views and choices and were involved in making decisions about their care and support. They also told us; "I am the boss, in charge of my care and paperwork." The person said they could make their own choices about care and day to day events and activity. They told us staff communicated well with them and always gave them time to express themselves. They said they felt listened to and felt their needs were important to staff.

There was evidence the person who used the service had been involved in planning their care and support needs. They told us they had spent a lot of time with the home care manager to put their support plan together and the home care manager had checked it all out with them to make sure this reflected all they had agreed and discussed.

Is the service responsive?

Our findings

The care records contained a clear assessment of the person's needs and included the types of support that was needed, how the person liked to receive support and at what time.

The support plan we looked at was detailed and personalised to ensure support was provided according to the person's preferences in a person centred way. We saw the person's cultural and religious views were respected and taken into account within the service delivery.

When we spoke with staff they demonstrated a good knowledge and understanding of the care and support needs and routines of the person who used the service. It was clear they knew the person well. Staff told us the care and support plans were reviewed on a regular basis to reflect any changes in the person's needs. One staff member said, "The care plans are very easy to follow and make it clear what is important."

The person told us they had been involved in developing their care and support plans and in reviews of them. They felt they had been listened to and their needs were understood well. They said the care and support plans met their current needs and if any adjustments were made they were involved. The person told us, "I'm fully involved all of the time." Support plans we looked at confirmed there was great emphasis placed on the person who used the service being in control of their own support and independence.

The person we spoke with told us they had no complaints. They said they could approach any member of staff with a concern and it would be taken seriously. They said they had regular contact with the office and management team and would not hesitate to report any concerns if they had any. They said they were confident anything reported would be dealt with.

The person who used the service told us staff supported them with a number of activities both in their own home and within the wider community. They said they enjoyed the company of staff who shared their interests.

There were systems in place to deal with concerns and complaints, which included providing people with information about the complaints process. We saw the system was set up to record and review complaints; none had been received for this service. However, the registered manager showed us how the system would be used to monitor complaints and show any learning from complaints to ensure service improvements.

Staff we spoke with knew how to respond to complaints, understood the complaints procedure and understood people's right to complain. We noted the complaints policy and procedure gave step by step guidance on how to make a complaint and the procedure the service followed when managing complaints.

Is the service well-led?

Our findings

There was a registered manager in post who was supported by a home care manager and a team of care and support staff. The person who currently used the service said it was a well-run organisation. They said the management team were well organised, supportive and very approachable. They said they were made to feel they were an important member of the team; they were asked for feedback and this was taken into account in the running of the service.

Staff spoke highly of the management team and spoke of how much they enjoyed their job. Comments we received included, "It's a great job and a really good agency to work for" and "I wouldn't want to work for anyone else, a great company and so much support." The management team were described as open and friendly. Staff said they felt like they mattered and were not 'just an employee'.

Staff said they felt well supported in their role and said the management team were aware of important issues about the service. Staff said the management team were approachable and always had time for them. They said they felt valued and listened to and could contribute ideas or raise concerns if they had any. Staff told us communication was good and they were kept informed of anything that affected the service or organisation. Staff confirmed if any incidents occurred within the service this information was shared to ensure lessons were learnt.

People who used the service and their relatives were asked for their views about the care and support the service offered. The care provider sent out annual questionnaires for people who used the service and their relatives. These were collected and analysed to make sure people were satisfied with the service. We looked at the results from the survey undertaken in 2015 when the agency was providing a service for more people. These showed a high degree of satisfaction with the service. The registered manager said any suggestions made through the use of surveys would always be followed up to try and ensure the service was continually improving and responding to what people wanted. No suggestions or changes had been made in the 2015 survey.

The person who currently used the service said they were frequently asked for feedback on the service. They said this included regular telephone calls and e mails from the office. We also saw spot checks were carried out to ensure staff were fulfilling their role properly and people who used the service were satisfied. We looked at some records of spot checks and saw where actions were identified such as the need for accurate record keeping or the need to wear the correct personal protective equipment this was addressed to ensure improvements in the service.