

Ms. Brenda Riley

Lettershanner

Inspection report

E-Innovation Centre University of Wolverhampton
Telford Campus
Priorslee
Telford
TF2 9FT

Tel: 01952288393

Website: www.lettershanner.co.uk

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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 inspection took place on 28 April and 2 May 2017 and was announced. The provider was given 48 hours' notice because the location provides domiciliary care services; we needed to be sure that someone would be in. Lettershanner provides personal care for people in their own homes. At the time of the inspection there were six people using the service.

At the last inspection, the service was rated good; at this inspection we found the service remained good.

The provider also carried out the role of manager, as an individual they were not required to have a registered manager in post. As the registered person they have the 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 support from staff that understood how to keep them safe. Staff understood how to safeguard people from abuse and ensure they were supported to manage any risks to their safety. Staff were safely recruited and there were sufficient staff to ensure people received support at the times that suited them and from a consistent staff team. People received prompts to take medicines and where required support from competent staff.

People received support from staff that were skilled and had received training in how to support people safely. 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. Staff understood how to support people with maintaining a healthy diet and monitoring their health.

People told us staff were caring and they were treated with dignity and respect. Staff demonstrated how they would ensure people received the care and support they needed whilst ensuring they had offered people a choice and allowed them to maintain their independence.

People told us the service responded to their needs and preferences. Staff were aware of what people liked and disliked and could describe how people's needs were met. People's needs were assessed and care plans were reviewed regularly. We could see there was a system in place to manage any complaints about the service.

The provider ensured they were accessible to people, relatives and staff. The provider was providing support to staff and ensuring a positive culture was maintained. Quality checks were carried out and people received and feedback was used to drive improvements.

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 remains good.

Is the service effective?

Good ●

The service remains good.

Is the service caring?

Good ●

The service remains good.

Is the service responsive?

Good ●

The service remains good.

Is the service well-led?

Good ●

The service remains good.

Lettershanner

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 announced inspection took place on 28 April and 2 May 2017. The inspection team consisted of one inspector.

As part of the inspection, we reviewed the information we held about the service, including notifications. A notification is information about events that by law the registered persons should tell us about. 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 asked for feedback from the commissioners of people's care to find out their views on the quality of the service. We also contacted the Local Authority for information they held about the service. We used this information to help us plan our inspection.

During the inspection, we spoke with two people who use the service and one relative. We also spoke with the provider, who also fulfilled the role of manager, a care services coordinator and one member of care staff.

We reviewed a range of records, which included the care records of three people. We looked at three staff files, which included pre-employment checks and training records. We also looked at other records relating to the management of the service including policies, records of incidents and staff spot checks.

Is the service safe?

Our findings

At this inspection we found the same level of protection from abuse, harm and risks as at the previous inspection and the rating continues to be good.

People told us they felt safe when staff were supporting them in their homes. One person said, "I feel very safe with the staff that come, it is always the same person and they are really good".

Staff had been trained and could identify people that may be at risk of harm or abuse and what they could do to protect them. Staff could describe how to identify abuse and how they would report this. We saw records of incidents that had been reported to the safeguarding authority for investigation. This meant staff knew how to keep people safe and protect them from abuse.

People were supported to manage risks to safety. One person said, "I have to use a shower chair and grab rail when having a shower, staff help me with this and make sure I am able to reach the rails. I am always confident with the staff there to assist". Staff understood risks to people's safety and we could see there were risk assessments in place which identified risks to safety and gave guidance to staff on how to mitigate risks. There had not been any accidents or incidents at the time of our inspection, however the provider had systems in place to investigate any incidents and staff understood how to report and record incidents should they occur. This showed staff understood risks to the people and what action to take to keep them safe.

People received support from safely recruited staff. We saw the provider checked to ensure staff were safe to work with vulnerable people through obtaining two references and using the Disclosure and Barring Service (DBS). The DBS helps employers make safer recruitment decisions and prevent unsuitable people from working with vulnerable people.

People were supported by sufficient staff. One person said, "The staff are always on time they are never late, you can always see them within two minutes of the time they are due". Another person told us, "I have never had any missed calls the service is great, I can't complain about one thing with the staff". A third person told us, "Cover is always provided if my regular staff are on holiday and there is never a problem". Staff told us they felt there were enough staff to cover calls and they were given sufficient time to get to the calls. The records of visits supported what we were told. This meant there were sufficient staff to support people safely.

People received effective support with receiving medicines. Staff told us they had been trained in medicines management and the provider confirmed that competencies were checked. We saw staff prompted people to take their medicines and on occasions they had to administer medicines for people. We saw records of the medicines people received were recorded on MAR charts and there were records of prompts that had been given to people. Staff and the provider could describe how people would be supported to take medicines safely if required. This meant there were safe systems in place to ensure people received their medicines as prescribed.

Is the service effective?

Our findings

At this inspection, we found staff were skilled to meet people's needs effectively; people continued to have freedom of choice and were supported with their dietary and health needs as in the previous inspection. The rating continues to be good.

People were supported by knowledgeable staff that were well trained. One person told us, "Staff are very well trained I think, they know exactly what I need help with". Staff told us they had received training which was updated regularly and they felt confident in their role. We saw records that supported what staff told us. The provider told us training was updated as and when needed and staff received any training which was required to support people. The provider told us as the staff team were small regular contact was maintained and support was offered to staff to ensure they had the right skills. The provider also said they would not take on a package of care unless they knew staff had the right skills to provide the support. This showed staff had the appropriate skills to support people.

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. We checked whether the service was working within the principles of the MCA. People confirmed they were asked to give consent to their care and support. One person said, "The staff always check things out with me and ask if it is ok before they start helping me". Staff confirmed they had received training in the MCA and were able to explain the principles of the legislation to us. Staff told us the people they supported were all able to consent to their care. We saw records which showed people had consented to their care. This showed people's rights were protected by staff that understood how to apply the principles of the MCA.

Most people we spoke with did not require support with meals, however one relative told us, "The staff make sure my relatives have their breakfast, they always do them what they want to eat, usually toast and cereal". Staff told us they did not provide much support with meals, but they were aware of how any risks associated with nutrition and hydration would need to be managed and said they would always ensure people had a choice. This meant staff understood how to support people with making choices about food and drinks and how any risks identified would be managed.

People we spoke with told us they did not need help with gaining access to healthcare professionals as they were able to do this for themselves or have help from family members. However relatives told us there had been occasions where staff had sought assistance and staff helped with monitoring people's health. One relative said, "The staff had to call an ambulance a few times to get help when my relative has been unwell". Another relative said, "The staff monitor how things are and always let me know if there is anything wrong". Staff described how they monitored people's health and sought support if they needed it. This means people were supported to manage their health and wellbeing.

Is the service caring?

Our findings

At this inspection people remained happy living at the service, they continued to be very complimentary of the staff and felt cared for. The rating continues to be good.

People and their relatives told us they were treated with kindness and respect by staff that supported them. One person said, "They are very thoughtful and very caring". Positive, caring relationships had been developed with people. One person said, ""The Staff are very respectful, kind and caring, I wouldn't know what to do without them". People received support from consistent staff. One relative said, "The staff are regular and therefore have a good rapport with my relative, they know them well and understand how to support them". Staff understood the importance of building trusting relationships with people and could give examples of how they fostered good relationships. One staff member said, "I have developed good relationships with people, I have been going to them for some time". The provider told us it was important to offer continuity of care to allow relationships to build. They told us they checked this through the quality questionnaires and spot checks. This showed people had good relationships with the staff that supported them.

People were supported to maintain their independence and make choices about their care and support. One person told us, "The staff support me with the areas I cannot reach when showering, I always do as much as I can first to stay independent". Staff told us how they supported people to maintain their independence by doing as much for themselves as possible. One staff member said, "I always try to accommodate people's choices, it's important for them to be in control". The provider told us in the PIR, "We encourage and promote as much independence as possible to support service user to live their lives in the way they chose". We saw people's care records gave information about what people needed support with and how to support people to maintain their independence. This meant staff understood the importance of maintaining people's independence and them having control over their lives.

People told us they were supported in a way that maintained their dignity and staff respected their privacy. One person said, "The staff are very good and maintaining my privacy and dignity, they are so thoughtful about things like that." Staff understood the importance of maintaining people's dignity and could give examples of how they did this when offering care and support such as covering people whilst washing and allowing people to lead and choose how their care was delivered. We found staff spoke about people in a respectful way and all the care records we saw described people in a manner which was dignified. This meant people had their dignity maintained by staff that respected them.

Is the service responsive?

Our findings

At this inspection we found staff were as responsive to people's needs and concerns as they were during the previous inspection. The rating remains good.

People received a responsive service that reflected their individual needs and wishes. One person told us, "The staff will always stay if they are needed to and do additional things that you ask for".

People and their relatives told us that their needs were assessed prior to the start of the service and these were regularly reviewed. One relative said, "There was an assessment when my relative started using the service and there has been a regular review of this since". Staff felt the service was responsive, they told us as the service was small and they were supporting a regular group of people they had time to get to know them really well. They were able to describe people's preferences to us, for example about toiletries and clothing. The provider told us in the PIR they respond to service users preferences of how they wish for care to be provided ensuring they respect cultural background, gender, age, sexuality, religion or belief and disability. We looked at peoples care records and these confirmed what we had been told. This meant people were involved in their assessment, planning and review of their care and support and staff understood their needs and provided a responsive service.

People and their relatives told us that they would be confident to share a worry or a concern with any staff should the need arise. One person told us, "I have never had to complain, I think they would be very responsive if had to make a complaint". All staff understood how to manage concerns or complaints if they received them from people or relatives. The provider told us about their complaints policy and how any concerns raised would be investigated, responded to and used to inform improvements to the service. There had not been any complaints about the service but we looked at the policy and could see there was a system in place to manage any complaints people made. This meant people were confident any complaints would be investigated and they would receive a response.

Is the service well-led?

Our findings

At this inspection we found the service was as well led as at the previous inspection. The rating remains good.

There was a positive culture at the service. People, relatives and staff all spoke highly of the service and how this was managed. One person said, "I would recommend the service without hesitation". Staff felt the service was good and they were able to support people. Staff told us they felt comfortable raising issues with the provider and these were always addressed. The provider told us staff could come in or speak with them on the phone at any time and they were in constant touch with staff to offer support as they worked alongside staff. This showed the provider was accessible to people using the service and staff.

People were supported by staff that understood their roles and responsibilities. We spoke with staff about their role and they were able to describe the responsibilities of their role. Staff were supported by the provider in their role, they told us how they could visit the office at any time for advice and support. Staff received regular support through supervision to discuss their roles. The provider told us they did not have a regular meeting as with such as small team individual communications were effective. This showed staff and the provider understood their roles and there were support mechanisms in place.

Registered persons are required to notify CQC of certain changes, events or incidents at the service. The registered provider was aware of their responsibilities in relation to this and we found notifications were submitted in a timely manner.

The provider had systems in place to check and monitor the quality of the service people received. People and their relatives told us about the checks the service made with them about quality. One person said, "They send out forms for me to complete from time to time asking questions about the quality of the service. I have nothing bad to say about it". Another person said, "We are always asked about any issues and they feedback if we raise a concern or query about anything". We saw surveys were sent out annually and people that raised concerns received a response. The provider told us they had regular sight of people's care records as they were involved in delivering people's care, and as the service was small there was no requirement for additional monitoring. They told us they were able to monitor people's care records and ensure they were receiving the support they needed. This meant the provider could effectively identify any concerns about people's care delivery and they monitored the quality of the service people received.