

Mrs Jane Archer

# Coastal Care Agency

## 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

Coastal Care provides domiciliary care to homes around Lancaster, Carnforth, Morecambe and surrounding areas. This agency provides domiciliary services to people who require support in their home. Support is provided to a wide range of people, both male and female and also offers support for carers. The service operates seven days a week. The service is contactable 24 hours a day. At the time of our inspection visit there were 39 people supported by the agency.

At the last inspection in January 2016 the service was rated Good. At this inspection we found the service remained Good.

People supported by the Coastal Care told us they were treated with respect, patience and kindness and reiterated they were not rushed. One person said, "This is an excellent service with caring people who don't rush around despite limits on time. I can only say good things about them."

Staff members said they were allocated sufficient time to visit people and undertake their duties. One staff member said, "We do spend the time we need and try not to rush."

Risk assessments had been developed to minimise the potential risk of harm to people during the delivery of their care. These had been kept under review and were relevant to the care provided.

Staff had been appropriately trained and supported. They had skills, knowledge and experience required to support people with their care and social needs.

There was a complaint system should people have concerns about the service and staff attitude, however none had been received by the agency.

The registered manager/owner had procedures in place to minimise the potential risk of abuse or unsafe care. Staff had received safeguarding training and were able to describe good practice about protecting people from potential abuse or poor practice.

Recruitment procedures remained robust to add to ensuring suitable staff were employed and keep people safe. In addition risks were identified and documented for potential risk of accidents such as the home environment staff supported people in.

Risk assessments and care records were organised and had identified the care and support people required. We found they were personalised and informative about care people received. They had been kept under review and updated annually or when changes occurred.

The service had safe infection control procedures in place and staff had received infection control training. Staff wore protective clothing such as gloves and aprons when needed. This reduced the risk of cross

infection.

Medication procedures protected people from unsafe management of their medicines. People received their medicines as prescribed and when required them. Also when staff supported people and when appropriate staff were provided with personal protective equipment to protect people and themselves from the spread of infection.

Staff rotas we were shown reviewed evidenced there were sufficient numbers and skill mixes of staff to meet people's requirements in their home. People we spoke with said they found staff to be well trained and knowledgeable about their responsibilities. One person who received a service said, "They seem well trained and confident. I know the ones who come here are good cooks."

People were 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 supported people to have a nutritious dietary and fluid intake. Assistance was provided in preparation of food and drinks as people needed.

When required staff supported people to attend healthcare appointments and liaised with their GP and other healthcare professionals. This was confirmed by records kept by the agency and talking with people who used the service.

The registered manager used a variety of methods to assess and monitor the quality of the service. These included regular audits and staff meetings to seek their views about the service provided. They produced surveys and sent them to people's home to complete.

## 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.

# Coastal Care Agency

## **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 service is a domiciliary care agency. It provides personal care to people living in their own homes. This includes providing support for people living with dementia, mental health and older people.

We gave the service 24 hours' notice of the inspection visit to ensure we had access to the office base and because we needed to be sure that they would be in.

The inspection site visit was on 31 January 2018. The process included an on-site office visit. We visited two people in their home, plus telephone interviews with people who received a service and their relatives/carers.

Prior to this inspection, as part of our planning, we reviewed all the information we held about the service, including data about safeguarding and statutory notifications. Statutory notifications are required to be submitted by the provider to the Care Quality Commission to advise of important events. We spoke with the local authority to gain their feedback about the care people received. This helped us to gain a balanced overview of what people experienced when accessing the service.

We used information the provider sent us in the Provider Information Return. This is information we require providers to send us at least once annually to give some key information about the service, what the service does well and improvements they plan to make.

An adult social care inspector carried out the inspection.

During the inspection, we visited two people in their own homes, also we spoke with six people who used the service and two carers/relatives. We also spoke with the care co coordinator as the registered manager/owner was not available on the day of the site visit. In addition we spoke with five care staff and a

senior carer. We looked at the care records of two people who used the service and training and recruitment records of three staff members. We contacted the registered manager/owner to discuss our findings following the site visit.

We looked at records relating to the management of the service. We did this to ensure the agency had oversight of the service and they could respond to any concerns highlighted or lead the service in ongoing improvements. We also looked at staffing levels focusing on how staff provided care within a geographical area.

# Is the service safe?

## Our findings

We asked people who received a service from Coastal Care if they felt safe in the care of staff who visited them. Comments were positive and included, "Always on time and because they come I feel safe that the agency have good staff to look after me." A relative/carer said, "I feel safe in the knowledge Coastal Care look after [relative] whilst I am not around."

The registered manager/owner had procedures in place to minimise the potential risk of abuse or unsafe care. Staff had received safeguarding training and were able to describe good practice about protecting people from potential abuse or poor practice. This was confirmed by staff we spoke with. Staff we spoke with were aware of the whistleblowing policy and knew which organisations to contact if the service did not respond to concerns they had raised with them.

We looked at how accidents and incidents would be managed by the service. However none had been reported. The care coordinator informed us any events that occurred would be addressed and they would monitor for trends and patterns when visiting people in their own home. The registered manager/owner told us they would analyse any incidents and learn lessons to ensure people were not at risk of repeated incidents.

Care plans of people supported by the agency had risk assessments. These were in the process of being updated when we visited homes of people. They identified potential risk of accidents such as the home environment staff supported people in. We spoke with a staff member who said, "We will be visiting every one of our clients to ensure all care records have been updated this week."

Staff members we spoke with said they were allocated sufficient time to visit people and undertake their duties. One staff member said, "We do spend the time we need and try not to rush." A person who received a service said, "Even though at times they come for a short while they don't rush." The management team completed unannounced visits to ensure staff were supporting people according to their care plan and stayed the allocated time stated. In addition staff told us protective personal equipment such as gloves to protect people from infection was available at the office. We confirmed stocks were available when we visited Coastal care premises.

Only one new member of staff had been recruited since the last inspection. We found staff had been recruited safely, appropriately trained and supported. They had skills, knowledge and experience required to support people with their care. The registered manager monitored and regularly assessed staffing levels to ensure people in their homes were supported at specific times according to their care plan. We looked at recruitment processes the service had in place. Checks were in place that were required. They included information about any criminal convictions recorded, an application form that required a full employment history and references.

Staff had received infection control training and were provided with appropriate personal protective clothing such as disposable gloves and aprons. This meant staff were protected from potential infection

when delivering personal care. People supported confirmed staff wore gloves and aprons when delivering their personal care.

Staff employed by the service received medication training to ensure they were competent to administer medicines. Staff we spoke with confirmed they had been trained and assessed as competent to support people to take their medicines. Two homes we visited people managed their own medicines. Staff told us the system was clear and in each care plan information was available for staff when visiting people's homes on how medicines should be administered.



## Is the service effective?

### Our findings

People who used Coastal Care told us they were satisfied with the service they received. For example they said staff were knowledgeable and aware of what support was required when they visited them. Comments we received included, "I was impressed of how competent [staff member] was." Also, "They provide great support and I have full confidence in them." Comments from relatives were positive about the effectiveness of the service. For example one relative said, "We discussed at the beginning of what staff were available and they bent over backwards to provide staff that would suit [relative] needs."

As at the previous inspection there was a training and development programme in place for staff. This supported staff to have the skills and knowledge to help provide safe and effective care for people who used the service. The management team had their own mandatory training that included medication, safeguarding and first aid. In addition all staff had obtained a national vocational qualification (NVQ) to level 2 provided by the agency. All staff we spoke we spoke with were impressed with what training was available and opportunities for training courses provided by the management team.

Coastal Care had a 24 hour on call service to manage support delivered for people and to make sure effective communication was available all the time should issues arise. A relative said, "We have the details in the case of an emergency."

Assessments of support had been undertaken by the registered manager/owner prior to support being provided that demonstrated the wishes of people being cared for. This meant staff had as much information as possible in order to provide quality care on an individual basis in their home. Care records of people who received a service contained documents to evidence they consented to their care. Each area of their support planning evidenced agreement to how they wished to be assisted and what support was provided. Following the office visit the care coordinator informed us all care records had been updated for all people and the new system had been implemented. Consent forms had been agreed and signed by all people who used Coastal Care.

Some people used the service to prepare their meals. The management team ensured staff had received food and hygiene training. People who said they had food prepared for them told us staff were competent in the kitchen and enjoyed prepared meals for them.

The staff at Coastal Care supported people with their healthcare needs. They were discussed as part of the planning of the support people required. Documentation in homes of people we visited contained contact details of their General Practitioner (GP) or other health professionals. Support for people was updated and times altered if a person's health needs changed. People who used the service confirmed this.

The Mental Capacity Act 2005 (MCA) provides a legal framework for making particular decisions on behalf of people who may lack the mental capacity to do so for themselves. The Act requires that as far as possible people make their own decisions and are helped to do so when needed. When they lack mental capacity to take particular decisions, any made on their behalf must be in their best interests and as least restrictive as

possible. People can only be deprived of their liberty to receive care and treatment when this is in their best interests and legally authorised under the MCA. We checked whether the service was working within the principles of the MCA. Policies and procedures were in place in relation to the MCA and Deprivation of Liberty Safeguards (DoLS).

## Is the service caring?

### Our findings

People supported by the Coastal Care told us they were treated with respect, patience and kindness. We confirmed this by only receiving positive comments from staff, people who received a service and relatives of those people. For example some comments we received from people who used the service included, "This is an excellent service with caring people who don't rush around despite limits on time. I can only say good things about them."

Care records we checked were personalised and included a 'Hello welcome to my home' document. This document told a story of the person's likes, dislikes and how they wanted to be supported and by whom. For example, if they preferred female or male carers. This demonstrated the registered manager/owner had listened to people and the information would assist staff. When supporting them. This supported staff to build relationships and communicate with people in a personalised and caring manner.

People who used Coastal Care and their relatives told us they were involved in their care, had discussed, and consented to their care packages. However during the inspection visit we found two care plans had not been signed and fully completed. Since the inspection visit the registered manager/ owner had informed us these had now been completed for all people to ensure they were up to date and signed. One person who received a service said, "Yes I did agree to the support plan and medication details to do my own. We went through it all for me to consent which I do."

We looked at how people were supported to maintain their independence. The registered manager/owner completed environmental risk assessments to ensure people's homes were suitable to meet their needs. One person who received a service said, "They do help and encourage me to do things myself which is why I feel I have come along so well."

Staff had a good understanding of protecting and respecting people's human rights. They were able to describe the importance of promoting each individual's uniqueness. People supported by Coastal Care were aware of their cultural and religious choices. For example a document in people's care plan requested information about any cultural or religious needs that should be taken into account during the visit of staff to support them.

People we visited in their own homes told us staff were sensitive and treated them with dignity. For example one person said, "They appreciate this is my home and are respectful of that. The staff who come here do treat me with kindness and yes dignity."

We spoke with the registered manager about access to advocacy services should people require their guidance and support. The service had information details for people and their families if this was required. This ensured people's interests would be represented and they could access appropriate services outside of the service to act on their behalf if needed and did not have family or friends to represent them.

## Is the service responsive?

### Our findings

We asked people who received a service from Coastal Care if support they received was personalised individual to their needs. One person said, "Definitely, they know how my body clock works and what my health is like and they respond to that I have to say." Another person said, "I do take my time but they know that and will keep busy and wait till I get going. It shows they know me well. I like that." A relative/carer told us staff were responsive to their family member's needs. They gave an example and said, "I did need them to stay a while longer one day as I was not well. There was no problem and they called the office and that was fine."

We found the agency had a matching process. This process aimed to keep staff as much as possible with the same people and with similar interests. This was confirmed by talking with staff and people who used the service." One person who used Coastal Care commented, "Yes they do stick to the same carers. We have got to know each other well. They brighten my day up."

We asked staff and the management team about supporting people with outside events or activities. They informed us staff regularly supported people to maintain contact with friends. Part of their role was to go out in the local community and ensure people who used the service were able to do that. One staff member said, "We have a number of clients we support to go out together to do shopping or other things."

We looked at care records of two people we visited in their home. Care records were informative, however not all up to date. The care co coordinator told us they were all being updated and showed us copies of the updated version of care plans. They told us they were visiting people in their own homes this week to ensure new care records were all up to date.

We looked at what arrangements the service had taken to identify record and meet communication and support needs of people with a disability, impairment or sensory loss. Care plans seen confirmed assessment procedures at Coastal Care identified information about whether the person had communication needs so they could access information independently.

We found there was a complaints procedure in place which described the investigation process and responses people could expect if they made a complaint. The complaints procedure was displayed in the office at Coastal Care. People we spoke with were aware of the process to follow. However we noted no complaints had been made to the registered manager/owner.

Contact details for external organisations including social services and the Care Quality Commission (CQC) had been provided, should people wish to refer their concerns to those organisations. This demonstrated there was a procedure in place, which staff were aware of to make sure any issues were looked into and outcomes reached.

We spoke about end of life care with the management team and how people were supported sensitively during their final weeks and days should they require a service. They told us they would liaise with other

health agencies that were directly involved in the situation to provide appropriate support and care. Staff training was being sourced through the agency to make sure staff were aware of supporting people in their own homes. One staff member said, "I have done end of life training through my NVQ training provided by Coastal Care."

## Is the service well-led?

### Our findings

People we visited in their homes all told us the management team were supportive and always calling in to see them. Also relatives we spoke with told us they had regular contact with the office staff and registered manager/owner. One relative said, "One word describes the organisation 'fine' no issues at all. It is very well led."

There was a registered manager in place who was also the owner. 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.

We found the service had clear lines of responsibility and accountability with a structured management team in place. The registered manager /owner was experienced, knowledgeable and familiar with the needs of the people they supported.

Staff told us the agency was well led, suitably managed and organised. They told us the management team were always around supporting them. One staff member said, "[Registered manager/ owner] is contactable any time and very supportive."

Staff meetings were held to involve and consult staff in improving the service, such as office and care staff. One staff member said, "They are useful and keeps us in touch as we work alone a lot." Staff told us the team worked well together and regularly discussed how to improve the service for people who used Coastal Care.

As from the previous inspection there were a range of audits in place. These were put in place to monitor the quality of service provided. Audits were undertaken and covered areas such as service delivery, care plans and staff training. Any issues found on audits were quickly acted upon and any lessons learnt to improve the service.

Surveys were in the process of being completed by people who used the service and family members. These had been sent out in December and January 2018. The results so far had been positive. One person who received a service commented, 'Quick to help and always find a solution to any problems.' The care co coordinator told us these would be analysed by the registered manager/owner and negative feedback would be responded to.

Coastal Care had systems and procedures in place to monitor and assess the quality of their service. For example the management team carried out spot checks at people's homes whilst support staff were undertaking their visits. One person who received a service said, "Yes [management team] calls now and then to make sure things are right." These were in place to improve and monitor the care service.

Coastal care management team worked in partnership with other organisations to make sure they were following current practice, providing a quality service and the people in their care were safe. These included

social services, healthcare professionals including social workers. This demonstrated the service maintained links with other professionals to ensure people received a good service.