

The Five Lamps Organisation

# Five Lamps Home Care (Eldon Street)

## Inspection report

Eldon Street  
Thornaby  
Stockton-on-tees  
TS17 7DJ

Tel: 01642753517

Date of inspection visit:

10 June 2021

14 June 2021

Date of publication:

12 July 2021

## 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

### About the service

Five Lamps Home Care (Eldon Street) is a domiciliary care agency. It is registered to provide personal care to people living in their own homes. Not everyone who used the service received personal care. CQC only inspects where people receive personal care. This is help with tasks related to personal hygiene and eating. Where they do, we also consider any wider social care provided. At the time of our inspection, 63 people were receiving personal care.

### People's experience of using this service and what we found

People told us they felt safe and were happy with the care they received. One person told us, "It's very good care, I feel safe and all the carers are very nice."

Medicines were well managed, and people were happy with the way staff gave them their medicines. Staff were aware of how to identify and report safeguarding concerns. Safe recruitment practices were followed. Staff followed infection control procedures, had access to PPE and had been trained in how to use it safely.

Staff training was up to date. The staff we spoke with were happy with the training they had received. People were supported by a range of healthcare professionals and staff would seek medical assistance when people were unwell. Where people required support with eating and drinking, staff had the skills to support them safely. People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible and in their best interests; the policies and systems in the service supported this practice.

Staff promoted people's independence and respected their rights, privacy and dignity. Where possible, care was delivered by a small group of staff to provide consistency. Late and missed calls were kept to a minimum by using an electronic monitoring system which alerted office to any delays so action could be taken.

Care records were on an electronic system and staff told us they were happy and confident using this. Most records were comprehensive and up to date. However, some of the care plans we looked at required further information and this was addressed immediately. People were involved in decisions about their care. Staff were aware of people's communication needs and how best to support them. Complaints were handled in line with the provider's policy.

The registered manager had systems in place to monitor and improve the quality and safety of the service provided. People's views about the service were sought individually and through surveys and the introduction of feedback cards. Staff wellbeing was very important to the provider. Staff felt well supported and able to approach the management team with any issues or concerns.

We found the management team receptive to feedback and keen to improve the service. Any changes

required were actioned immediately. The registered manager worked with us in a positive manner and provided all the information we requested.

For more details, please see the full report which is on the CQC website at [www.cqc.org.uk](http://www.cqc.org.uk)

#### Rating at last inspection

This service was registered with us on 13 July 2020 and this is the first inspection.

The last rating for the service at the previous premises was good, published on 9 May 2018.

#### Why we inspected

This was a planned inspection based on the date the service was registered.

#### Follow up

We will continue to monitor information we receive about the service until we return to visit as per our re-inspection programme. If we receive any concerning information we may inspect sooner.

## 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.

Details are in our safe findings below.

### Is the service effective?

Good ●

The service was effective.

Details are in our effective findings below.

### Is the service caring?

Good ●

The service was caring.

Details are in our caring findings below.

### Is the service responsive?

Good ●

The service was responsive.

Details are in our responsive findings below.

### Is the service well-led?

Good ●

The service was well-led.

Details are in our well-Led findings below.

# Five Lamps Home Care (Eldon Street)

## **Detailed findings**

### Background to this inspection

#### The inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 (the Act) as part of our regulatory functions. We checked whether the provider was meeting the legal requirements and regulations associated with the Act. We looked at the overall quality of the service and provided a rating for the service under the Care Act 2014.

#### Inspection team

The inspection was carried out by an 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.

#### Service and service type

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

The service had a manager registered with the Care Quality Commission. This means that they and the provider are legally responsible for how the service is run and for the quality and safety of the care provided.

#### Notice of inspection

We gave the service 24 hours' notice of the inspection. This was because it is a small service and we needed to be sure that the provider or registered manager would be in the office to support the inspection.

Inspection activity started on 10 June 2021 and ended on 14 June 2021. We visited the office location on 10 June 2021.

#### What we did before the inspection

We reviewed information we had received about the service since the last inspection. We sought feedback

from the local authority and professionals who work with the service. The provider was not asked to complete a provider information return prior to this inspection. This is information we require providers to send us to give some key information about the service, what the service does well and improvements they plan to make. We took this into account when we inspected the service and made the judgements in this report. We used all of this information to plan our inspection.

#### During the inspection

We spoke with five people who used the service and seven relatives about their experience of the care provided. We spoke with seven members of staff including the nominated individual, registered manager, office staff and care assistants. The nominated individual is responsible for supervising the management of the service on behalf of the provider.

We reviewed a range of records. This included four people's care records and multiple medication records. We looked at four staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including policies and procedures were reviewed.

#### After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at a number of records sent to us electronically including training data and quality assurance records.

# Is the service safe?

## Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm.

This is the first inspection since the service was registered at new premises. This key question has been rated good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- Systems and processes were in place to keep people safe from avoidable abuse.
- Staff were aware of the steps to follow to raise any safeguarding concerns. One member of staff told us, "I know how to report a safeguarding concern. My supervisor is really good and there is always an open door in the office."

Assessing risk, safety monitoring and management

- People felt safe and secure with the support they received. One person told us, "Do I feel safe? 100%."
- Staff understood where people required support to reduce the risk of avoidable harm. An electronic care plan system meant staff had access to the latest information and could see before attending a call how the person had been during recent days.
- Most care plans contained clear assessments of risk and included control measures for staff to follow to keep people safe. We found some risk assessments needed further information. We discussed this with the registered manager and immediate action was taken.
- Environmental checks of people's homes had been done to ensure the safety of people and staff.

Staffing and recruitment

- The provider had processes in place to ensure the safe recruitment of staff and these had been correctly followed.
- There were systems in place to ensure that there were enough suitably trained staff to effectively meet people's care needs and to keep them safe.
- People received consistency of care from a small team of regular staff wherever possible. One person told us, "We have quite a few regular [staff]. If someone new comes they always come with someone else first."

Using medicines safely

- Medicines were administered safely. People who required help to take medicines received support from trained staff. Spot checks were done to ensure staff training was being correctly put into practice.
- The management team carried out regular medicine audits and action had been taken where issues had been identified.

Preventing and controlling infection

- The service had an infection prevention and control policy in place. Additional guidance in relation to infection prevention and control during the pandemic was introduced to provide staff with current information about COVID-19.

- Staff had received training in infection prevention and control, including donning and doffing of PPE. Staff told us they were supplied with enough PPE to undertake their work safely. People confirmed that staff always wore PPE.
- The provider was accessing regular testing for staff.

#### Learning lessons when things go wrong

- Accidents and incidents were reported and recorded appropriately. These were analysed to look for any patterns or trends and lessons learnt to keep others safe in the future.



# Is the service effective?

## Our findings

Effective – this means we looked for evidence that people's care, treatment and support achieved good outcomes and promoted a good quality of life, based on best available evidence.

This is the first inspection since the service was registered at new premises. This key question has been rated good. This meant people's outcomes were consistently good, and people's feedback confirmed this.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law

- People's care needs were assessed when they started to use the service and reviewed regularly. Care records included information about people's choices and preferences which staff respected.
- Care records included evidence of people's consent to their care and support. People and relatives confirmed consent was sought appropriately.

Staff support: induction, training, skills and experience

- Staff had the skills and knowledge to carry out their role effectively. Where a person's care required the use of specialist equipment the appropriate training had been delivered to those staff who needed it.
- New staff were provided with an induction programme to ensure they could carry out their role safely and competently. One member of staff told us, "The induction was fantastic. I did lots of shifts shadowing experienced staff. I've already done NVQ level 2 and now Five Lamps are putting me through level 3."
- Staff told us they felt well supported and had received regular supervision. One member of staff told us, "I have a meeting with [my line manager] once a month but they text in between to see how I am. Five Lamps are good, they're there for me if I need them."

Supporting people to eat and drink enough to maintain a balanced diet

- Staff provided support with food preparation where the care package required it. Staff had received training to prepare food safely and had access to an 'eat well' guide to help them prepare healthy balanced meals.

Staff working with other agencies to provide consistent, effective, timely care; Supporting people to live healthier lives, access healthcare services and support

- People were supported to have access to a range of healthcare professionals to help ensure they remained healthy.
- Staff had a good understanding of the people they were caring for and acted promptly if a person required medical assistance. One member of staff told us, "I was in a call last year and thought the lady was having a stroke. I called the ambulance and rang the office for some help. They got someone to come out quickly."

Ensuring consent to care and treatment in line with law and guidance

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. When people receive care and treatment in their own homes an application must be made to the Court of Protection for them to authorise people to be deprived of their liberty. We checked whether the service was working within the principles of the MCA.

- There was nobody under a Court of Protection order at the time of our inspection. Consent was obtained prior to care being delivered and best interest decisions were made where necessary.
- The provider had an MCA and DOLs policy in place to support staff in the effective implementation of the Act and ensure staff acted in people's best interests at all times.

# Is the service caring?

## Our findings

Caring – this means we looked for evidence that the service involved people and treated them with compassion, kindness, dignity and respect.

This is the first inspection since the service was registered at new premises. This key question has been rated good. This meant people were supported and treated with dignity and respect; and involved as partners in their care.

Ensuring people are well treated and supported; respecting equality and diversity

- People and their relatives were very happy with the care provided. One person told us, "The staff are definitely kind, we have our little jokes."
- Staff we spoke with were dedicated to providing the best possible care to people. One member of staff told us, "One person will say, 'I'm alright' if I ask if she's comfortable and because I know her quite well now I just know she's not, so I ask again and we make sure I get her comfortable before I go."
- Care plans contained information about people's religious and cultural needs. Staff were also aware and mindful of any additional needs people may have, for example due to sensory loss.

Supporting people to express their views and be involved in making decisions about their care

- People could express their views as part of daily conversations with staff, review meetings and surveys.
- Staff encouraged people to make decisions about their day to day routines and their care needs, in line with their personal preferences. One member of staff told us, "I get outfits out and show them so they can choose what they want to wear. They might ask for one thing for lunch on a morning but change their mind by lunchtime and that's fine, it's their choice."
- People had access to advocates if this was required. An advocate helps people to access information and be involved in decisions about their lives.

Respecting and promoting people's privacy, dignity and independence

- People using the service and their relatives felt that staff delivered care in a dignified and respectful way. A relative told us, "They do [care for my family member with dignity and respect], they always chat to her and ask if there is anything else they can do."
- Staff encouraged people to maintain their independence whenever possible. One member of staff told us, "In terms of washing for example, I'd ask if they want to wash their own face. Some people like you to do it for them but it's important to ask so they feel they are still able to do things for themselves."
- People's information was stored securely and used appropriately in line with the provider's confidentiality policy and government regulations.

# Is the service responsive?

## Our findings

Responsive – this means we looked for evidence that the service met people's needs.

This is the first inspection since the service was registered at new premises. This key question has been rated good. This meant people's needs were met through good organisation and delivery.

Planning personalised care to ensure people have choice and control and to meet their needs and preferences

- Care plans contained a good level of information about people's care needs. However, we found some care plans lacked information specific to the individual. Where a person's care needs were more unique, the forms in use did not always guide staff to record this in full. We discussed this with the registered manager and action was taken immediately to improve records and review forms.
- People received care and support that was focused on their individual needs, preferences and what was important to them. The people we spoke with had seen their care plan and most told us they had been involved in the writing and reviewing of it.
- The registered manager and staff understood the importance of promoting equality and diversity and respecting an individual's preferences.

Meeting people's communication needs

Since 2016 onwards all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard (AIS). The standard was introduced to make sure people are given information in a way they can understand. The standard applies to all people with a disability, impairment or sensory loss and in some circumstances to their carers.

- The management team ensured people's communication needs were assessed and supported. Care plans contained relevant information about people's communication needs and information could be provided in different formats if this was required.

Improving care quality in response to complaints or concerns

- The provider had a complaints procedure in place. We reviewed the way complaints were handled and found this to be in line with the policy.
- People were supported to raise any concerns and action was taken in response to these. One person told us, "I've never made a formal complaint. I asked for the times to be the same and that happened."

End of life care and support

- Five Lamps provided end of life care. Staff had been trained in this area and there was a comprehensive and up to date policy in place. The provider ensured the views of relatives were considered, alongside people's own views which were prioritised.

# Is the service well-led?

## Our findings

Well-led – this means we looked for evidence that service leadership, management and governance assured high-quality, person-centred care; supported learning and innovation; and promoted an open, fair culture.

This is the first inspection since the service was registered at new premises. This key question has been rated good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

- People told us they could contact the office when required. One person said, "[The registered manager] is friendly enough. I have no problems; they said any issues to just ring them."
- The provider was mindful of staff wellbeing. They had invested in a bespoke training course 'looking after your wellbeing' for all staff and a 24-hour employee assistance programme where all staff can access free confidential support. One member of staff told us, "They do look after you. When it was really hot the other day they sent a message to remind you to stay hydrated and to let us know there was a supply of bottled water and sun cream in the office if needed."
- Staff we spoke with were happy in their job and told us morale amongst the staff team was good. One member of staff told us, "I absolutely love my job. You get to know people and when you know you've made a difference to someone's life and you've made them happy it's so rewarding."

How the provider understands and acts on the duty of candour, which is their legal responsibility to be open and honest with people when something goes wrong

- The registered manager understood their duty of candour responsibilities. They had submitted notifications to CQC in line with legal requirements.
- The registered manager was open and honest with us about the service, its strengths and weaknesses and areas they were further developing. They were very responsive to our inspection feedback and made positive changes immediately.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; Continuous learning and improving care

- The registered manager undertook a range of audits and checks on a regular basis to help ensure high standards were maintained.
- Staff told us they had been kept up to date with changes to guidance during the pandemic.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- People were treated with respect and as unique individuals. One member of staff told us, "It's important to people to do things the way they like to do it. You might do something one way and they might like it done another way. Everyone has their own little ways, everyone is different."
- The provider asked people for feedback in the form of a survey. They had also recently introduced

feedback cards which everyone was given to complete and pop in the post whenever they wished to. One person told us, "They sent me a survey, my carer posted it for me about a week ago."

- Staff meetings had not been taking place due to the pandemic. The registered manager explained how extra supervision sessions had been put in place as a result of this and regular newsletters were also circulated to staff. The management team had an open-door policy and staff were welcome to pop in for a chat.

#### Working in partnership with others

- The registered manager and staff worked in partnership with health and social care professionals who were involved in people's care and there was a good relationship with the local authority.
- There was a good relationship with the local community. A local school had been involved in making and supplying visors to support the service during the pandemic.