

Loidis Care Services Limited

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Inspection report

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07 October 2020

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Ratings

Overall rating for this service

Inspected but not rated

Is the service safe?

Requires Improvement



Is the service well-led?

Good



Summary of findings

Overall summary

About the service

Loidis care services is a domiciliary care agency providing personal care to adults living in their own homes, some of whom require end of life care. At the time of the inspection, the service was supporting three people.

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

Relatives of people using the service were complimentary about the care provided and the positive impact it had on their loved ones and themselves. One said, "The smile on my [relative's] face when [care workers] arrive is so good to see."

Improvements were required in how risks to people's care were recorded. However, staff were aware of risks to people's care and knew how to manage these. Relatives felt their loved ones received safe care.

Overall medication was managed well, however improvements were required in recording the support provided with prescribed creams and 'as and when required' medication. We have made a recommendation about the management of these medicines.

Recruitment processes did not always evidence robust checks had been undertaken to ensure staff were safe to work with vulnerable people.

There were several quality assurance processes in place which were checking important areas of care delivered, however these had not always been effective in identifying some of the issues found at this inspection.

Staff and the registered manager were knowledgeable about identifying and reporting safeguarding concerns. The provider ensured staff followed safe infection control practices. People were protected from the risk of infection and plans were in place to mitigate the increased risks from the current Covid-19 pandemic.

We received positive feedback about the registered manager being approachable and caring. The management team demonstrated a willingness to continuously learn and improve.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk

Rating at last inspection

This service was registered with us on 8 April 2019 and this is the first inspection.

Why we inspected

This service had been registered with CQC for over a year. As a result, we undertook a focused inspection to review the key questions Safe and Well-led only.

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?

The service was not always safe.

Details are in our safe findings below.

Requires Improvement ●

Is the service well-led?

The service was well-led.

Details are in our well-Led findings below.

Good ●

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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

This inspection was conducted by two inspectors.

Service and service type

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

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 we needed to be sure that the registered manager would be available to support the inspection.

What we did before the inspection

Before the inspection, we reviewed all the information we held about the service including information about important events which the service is required to tell us about by law. We requested feedback from other stakeholders. These included the local authority safeguarding team, commissioning team and Healthwatch Leeds. Healthwatch is an independent consumer champion that gathers and represents the views of the public about health and social care services in England. We used all of this information to plan our inspection.

During the inspection

We visited the service on 7 September 2020. Between the 2 and the 8 September 2020, we sought information and documentation from the provider. We spoke with two relatives of people using the service.

We spoke with five members of staff including care workers, care manager and registered manager.

We looked at care records for two people using the service and looked at medication records for three people. We looked at training and recruitment records for staff. We also reviewed various policies and procedures, and the quality assurance and monitoring systems of the service.

After the inspection

We received emails from the registered manager with additional evidence. This information was used as part of our inspection.

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 for this newly registered service. This key question has been rated requires improvement. This meant some aspects of the service were not always safe and there was limited assurance about safety. There was an increased risk that people could be harmed.

Assessing risk, safety monitoring and management

- During this inspection, we found some risks to people's care had not been recorded or the risk assessments were not detailed. For example, moving and handling risk assessments had not been completed or known risks had not be added to relevant risk assessments. One person had equipment in place to maintain their skin integrity, and regular support from the district nursing team, but their skin risk assessment lacked detail. We spoke with the registered manager about these issues and they told us they would review their risk assessment and ensure these were in place and complete.
- In our conversations with staff, they were able to describe to us relevant risks to people's care and how to manage them.
- Relatives told us they felt their loved ones received safe care.

Using medicines safely

- People received their medicines as needed. The provider worked with people's families to ensure the medication was ordered and administered correctly.
- However, improvements were required in the recording of 'as and when required' medication. For example, one person's 'as and when required' medicine protocol lacked detail in relation to the time between dosages; this is important to ensure people do not overdose. Another person's body map lacked detail in relation to where to apply their prescribed cream. The registered manager told us they would review this immediately. We recommend the provider consider current guidance on recording 'as and when required' medication and take action to update their practice.
- Staff were trained in the administration of medicines and could describe how to do this safely. The registered manager told us they assessed staff's competency to complete this task during spot checks of staff practice.

Staffing and recruitment

- The service did not always follow safe recruitment practices. Evidence of pre employment checks before commencement of employment had not always been retained. We spoke with the registered manager about this and they said they would strengthen their recruitment processes.
- Care was delivered by a small and consistent team. There were no reports of missed or late visits.
- Staff told us they had enough time to spend with people to allow them to complete all the necessary care tasks.

Systems and processes to safeguard people from the risk of abuse; Learning lessons when things go wrong

- Staff had a good knowledge of the types of abuse, the safeguarding procedures and who to inform if they had any concerns or concerns had been raised with them.
- The registered manager understood their role and responsibility in relation to safeguarding.
- Staff told us they would report any safety issues and the registered manager was able to describe us what they would do to address and prevent incidents happening again.

Preventing and controlling infection

- People were protected against the risk of infections.
- Staff had completed training in infection control and food hygiene and told us protective equipment was made available, such as gloves and aprons.
- The provider had plans in place to mitigate the increased risks from the current Covid-19 pandemic.

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 for this newly registered service. This key question has been rated good. This meant the service was well-led. Leaders and the culture they created promoted high-quality, person-centred care.

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

- We found the quality assurance systems in place were proportional to the current size of the service, however their effectiveness could be improved in relation to checking the quality of records, such as risk assessments, 'as and when required' protocols and recruitment records.
- The registered manager and care manager were open to the inspection process; they quickly acted on recommendations and demonstrated a willingness to continuously learn and improve.
- There was a registered manager in place. They were clear about their responsibilities, knowledgeable about people's needs and regularly provided direct care to people. Relatives shared positive feedback about the registered manager and their team. Their comments included, "[Name of registered manager] judges the situation and as time goes and as my [relative's] health has deteriorated, [name of registered manager] is able to come in and advise us;" "[Registered manager] is very caring, [has] a positive attitude and a big smile" and "[Registered manager's] team are an extension of our family."

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

- Relatives shared positive feedback about the impact that the care provided by the service had on them and their loved ones.
- One relative who's loved one required end of life care told us, "[Care provided by Loidis Care Services] has created that family atmosphere that we wanted all along. When [relative] is in discomfort, [care workers] will immediately come to us. They will always ring if they are going to be a little bit late. Communication wise is perfect."
- Staff had confidence in the leadership and management of the service and told us it was a good place to work.

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

- Staff told us they felt able to raise any issues and were confident that the registered manager would listen to them and act. Staff meetings were taking place and records kept.
- Relatives were involved in making decisions around their loved one's care and felt communication worked well.

Working in partnership with others

- The registered manager was in regular contact with other relevant healthcare professionals to support and ensure the best outcomes for people. This included work with social workers, district nurses, palliative nurses and occupational therapists.