

Lighthouse Care Ltd

Lighthouse Care Agency

Inspection report

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09 February 2017

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Ratings

Overall rating for this service

Requires Improvement ●

Is the service safe?

Inspected but not rated

Is the service well-led?

Inspected but not rated

Summary of findings

Overall summary

We carried out an announced comprehensive inspection of this service on 28 September 2016. Breaches of legal requirements were found. After the comprehensive inspection, the provider wrote to us to say what they would do to meet legal requirements in relation to the breaches.

We undertook this focused inspection to check that they had followed their plan and to confirm that they now met legal requirements. This report only covers our findings in relation to those requirements. You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Lighthouse Care Agency on our website at www.cqc.org.uk

This announced focussed inspection took place on the 9 February 2017. Lighthouse Care Agency is a domiciliary care agency that provides care and support to people living in their own home to enable them to retain their independence. When we inspected the service provided care and support to four people. The service is predominantly provided to people living in and around Northampton.

A registered manager was in post. A registered manager is a person who has registered with the Care Quality Commission (CQC) 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. The registered manager did not always meet these legal requirements.

The registered manager had implemented systems to assess, monitor and improve the quality and safety of people using the service, but these required further work to ensure that they became embedded into practice.

People were protected from potential harm as staff had received training and understood their responsibilities to safeguard people. The provider's safeguarding policy had been updated and provided details on when and how to report a safeguarding concern.

People were protected from the risks associated with the management of medicines as the registered manager had implemented systems to manage people's medicines safely.

The registered manager understood their responsibilities in notifying CQC of incidents.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

We found that action had been taken to improve safety.

People were safeguarded from potential harm as the provider had ensured that staff had sufficient knowledge of how to recognise suspected abuse or how to report this to the relevant authorities.

People were protected from the risks associated with medicines as the provider had implemented systems to manage medicines in a safe way.

We could not improve the rating for Safe from requires improvement because to do so requires consistent good practice over time. We will check this during our next planned comprehensive inspection.

Inspected but not rated

Is the service well-led?

We found that action had been taken to improve the governance of the service.

Quality assurance procedures had been implemented but required further work to embed into practice.

The provider notified the Commission of incidents as required by the regulations.

We could not improve the rating for Well Led from requires improvement because to do so requires consistent good practice over time. We will check this during our next planned comprehensive inspection.

Inspected but not rated

Lighthouse Care Agency

Detailed findings

Background to this inspection

We undertook an unannounced focussed inspection of Lighthouse Care Agency on 9 February 2017. This inspection was done to check that improvements to meet legal requirements planned by the provider after our inspection on 28 September 2016 had been made. The team inspected the service against two of the five questions we ask about services: is the service safe and well led? This is because the service was not meeting some legal requirements.

This focussed announced inspection was carried out by an inspector and took place 9 February 2017. We inspected the service to see if the service was compliant with the regulations and to follow up on the actions the provider had agreed to do from our previous inspection in September 2016.

With domiciliary care agencies we can give the provider up to '48 hours' notice of an inspection. We do this because in some community based domiciliary care agencies the registered manager is often out of the office supporting care staff or, in some smaller agencies, providing 'hands-on' care to people at home.

Before our inspection, we reviewed information we held about the provider including, statutory notifications that they had sent us. A statutory notification is information about important events which the provider is required to send us by law.

During the inspection we visited the agency office, we spoke with two care staff including the registered manager. We looked at the care records relating to medicines, safeguarding and records related to the quality monitoring of the service.

Is the service safe?

Our findings

During our inspection on 28 September 2016 we found that there was a breach of Regulation 13 (1, 2 and 3) of The Health and Social Care Act 2008 (Regulated Activities) Regulations 2014: Safeguarding service users from abuse and improper treatment. We found that staff did not know how to recognise when people were at risk of harm.

During this inspection we found that people were protected from potential harm as staff had received training and understood their responsibilities to safeguard people. The registered manager had ensured that staff had access to information on how to recognise different types of potential abuse and who to report their concerns to. One member of staff told us "We all met and discussed what safeguarding meant, we quizzed each other." The registered manager explained that the staff had discussed scenarios, including what to do if they were not able to report their concerns to the manager. The provider's safeguarding policy had been updated and provided details on when and how to report a safeguarding alert.

During our inspection on 28 September 2016 we found that there was a breach of Regulation 12 (2 c and g) of The Health and Social Care Act 2008 (Regulated Activities) Regulations 2014: Safe care and treatment. We found that people were not protected from the risks associated with the management of medicines.

During this inspection we found that the registered manager had implemented systems to manage people's medicines safely. The manager had ensured that people who administered people's medicines had received training and received supervision. Staff completed records to show when people had taken their medicines and where they had refused. The registered manager had liaised with the pharmacy for one person to ensure that they had their medicines in liquid form to help them swallow their medicines. People were protected from the risks associated with the management of medicines.

We have only reviewed the matters relating to the provider's actions to meet the legal requirements in relation to the previous breaches of regulations. We did not inspect all aspects of the key lines of enquiry (KLOES) and therefore the rating remains as per our previous inspection, Requires improvement.

Is the service well-led?

Our findings

During our inspection on 28 September 2016 we found that there was a breach of Regulation 18 (2e and f) Notifications of other incidents, of The Registration Regulations 2009. We found that the registered manager had not informed CQC when incidents such as suspected abuse or police involvement had occurred.

During this inspection we found that the registered manager understood their responsibilities in notifying CQC of incidents. We had received appropriate and timely notifications of incidents.

During our inspection on 28 September 2016 we found that there was a breach of 17 (2a and b), of The Health and Social Care Act 2008 (Regulated Activities) Regulations 2014: Good governance. We found that there were no systems or processes in place to assess, monitor and improve the quality and safety of people using the service.

During this inspection we found that the registered manager had implemented systems to assess, monitor and improve the quality and safety of people using the service.

The registered manager carried out regular checks at people's homes to ensure that they received their care as planned at the allocated times, this was recorded in the daily notes. They also checked that the daily notes reflected the care people received and the medicines had been managed safely.

The registered manager had carried out staff supervision and staff meetings and demonstrated that they understood their responsibilities to supporting staff in their role. The provider had installed a computer system to record and prompt the registered manager when updates to training, supervisions and policies were due. The system also assisted the registered manager to monitor the quality of the service, rotas and provide care plans and risk assessments; however, this was in its infancy and had not yet been tested or embedded.

The systems and processes to ensure that people's care was monitored and improved were in place, but required further commitment from the provider and registered manager to ensure that these became embedded into practice.

We have only reviewed the matters relating to the provider's actions to meet the legal requirements in relation to the previous breaches of regulations. We did not inspect all aspects of the key lines of enquiry (KLOES) and therefore the rating remains as per our previous inspection, Requires improvement.