

Lakeshore Care Ltd

# Lakeshore Care Ltd

## Inspection report

SBC House  
Restmor Way  
Wallington  
Surrey  
SM6 7AH

Tel: 02086619960

Date of inspection visit:  
21 September 2017

Date of publication:  
11 October 2017

### 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

Lakeshore Care Ltd provides personal care and support to people in their own homes in Sutton. The people who use the service are mainly older people and people with a physical disability. On the day of our inspection 25 people were using the service.

At the time of the inspection, there was a registered manager. 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.

This inspection took place on 21 September 2017. The last inspection was in June 2016 and at that inspection we rated the provider overall as "requires improvement". We found that best practice guidelines for the recording of the administration of medicines was not followed. This meant it was unclear if people had received their medicines as prescribed. We also found there was a lack of continuity for people in the staff who provided their care. At that inspection people told us they felt their needs were sometimes not fully understood as a result. At this inspection we found the provider had taken action and made appropriate improvements with these areas of service provision. We reviewed the policy and practice by staff for supporting people with their medicines. We saw medicines administration records were kept and maintained on people's care files. Care plans for people contained clear information about any support they required with their medicines and this matched what staff told us. Staff completing medicines administration records were required to confirm whether or not people had taken their medicines and these were appropriately completed. The registered manager told us that only staff who had received training and support to do with administering medicines were allowed to support people in this way. Staff confirmed this with us when we spoke with them.

People told us they felt safe and were supported by staff who knew how to keep them safe. The provider had arrangements to help ensure that risks to people's health and safety were assessed and well managed by staff.

People told us they appreciated the consistency of staff who now supported them and said they were supported by appropriate numbers of staff. Staff recruitment procedures helped to keep people safe. Staff had the knowledge and skills to care for people effectively and felt well supported by appropriate training and effective supervision. All of this helped to maintain a stable staff team.

People told us staff knew them well and were kind and caring towards them. It was evident staff had established positive relationships with people. People also said staff valued people, treated them with respect and promoted their rights, choice and independence.

People said staff who supported them had up to date information about their needs and this was delivered in the way they wanted. We found there was consistency in the provision of care for people and this enabled

caring relationships to be developed.

People and their relatives told us they were involved in the planning and reviewing of their care. There was a clear plan of care available for staff who supported people according to their needs and wishes.

People were provided with support that was responsive to their changing needs. People knew about and were able to make a complaint and were confident the provider would respond appropriately to any concerns they might have.

We received positive feedback about the management of the service. The registered manager and the staff were approachable and fully engaged with providing good quality care for people who used the service. The provider had systems in place to continually monitor the quality of the service and there were arrangements for people to be asked for their opinions via surveys. Action plans were developed where required to address areas for 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 was safe. People received the support required to keep them safe and manage any risks to their health and safety.

There were sufficient numbers of staff to meet people's needs. Staff recruitment processes were appropriate to help keep people safe.

Procedures were in place to ensure that people received the support they needed to manage their medicines. These procedures were followed appropriately by staff.

### Is the service effective?

Good ●

The service was effective. People were cared for by staff who received support through appropriate training and effective supervision.

People were able to give consent for their care and they told us they were always asked by staff about the way they wanted their care and support offered to them.

People were supported to eat and drink enough and to have access to healthcare services.

### Is the service caring?

Good ●

The service was caring. People who used the service told us they were treated with kindness and compassion in their day to day care.

People were involved in making decisions about their care and the support they received.

### Is the service responsive?

Good ●

The service was responsive. People received person centred support and staff were responsive to their needs. People's care plans were regularly reviewed and updated.

People felt able to raise any concerns and complaints were appropriately investigated and responded to.

## Is the service well-led?

The service was well led. There was an open and positive culture in the service and people were asked for their views about the service.

There was an effective quality monitoring system to check that the care provided met people's needs.

Good 

# Lakeshore Care Ltd

## **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 checked 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.

The inspection was announced and took place on 21 September 2017. The provider was given 48 hours' notice because the location provided personal care to people living in the community and we needed to be sure that staff and the registered manager would be available to meet with us in the office. It was carried out by one inspector. Before this inspection we looked at notifications that the provider is legally required to send us about certain events such as serious injuries and safeguarding alerts.

At the inspection we spoke with two staff members, the registered manager and the director. We inspected four people's care files and four staff files. We also looked at other records related to the running of the service. After the inspection we spoke on the telephone with five people who used the service and five relatives.

# Is the service safe?

## Our findings

All the people we spoke with told us they received help from their relatives with taking their medicines. They said they were sometimes prompted by staff who might ask them if they had taken their medicines. One person told us, "I do sometimes need reminding when it's time for me to take my tablets." The relatives we spoke with confirmed they usually provided the prompts people required to manage their medicines.

We saw medicines administration records were kept and maintained on people's care files. Care plans for people contained clear information about any support they required with their medicines and this matched what staff told us. Staff completed medicines administration records where required to confirm whether or not people had taken their medicines and these were appropriately completed. The registered manager told us that only staff who had received training and support to do with administering medicines were allowed to support people in this way. Staff confirmed this with us when we spoke with them.

People and their relatives told us they felt safe with the staff who provided care and support for them. One person said, "The staff are so willing to help me the way I want and need to be helped. I have no fears about my safety with them." One of the relatives said, "We couldn't be happier actually. We have had four or five of these services before this one and they are the best we've had. I am confident that my mother is safe with this service."

People told us they were supported by staff who knew what to do to keep them safe. One person said, "They came and did an initial assessment of what I needed to be done. They did a risk assessment and they take precautions to make sure I am safe, when giving me my care." A relative we spoke with agreed that staff worked to ensure their relative's safety when they provided them with care. They told us staff worked with the risk management plans and care plans for guidance.

Staff files evidenced that staff received appropriate training for safeguarding adults. Staff knew what action they should take if they had any concerns. One member of staff told us they would report any concerns they encountered while doing their work to the registered manager. Another member of staff described to us the different types of abuse they thought they might come across and said they would report anything straight away to the registered manager. Both members of staff told us they believed the registered manager would act upon their concerns appropriately.

When we inspected people's files we saw comprehensive risk assessments were carried out by the registered manager together with people and their relatives. Any risks identified were assessed and managed so as to help to ensure that people received safe and effective care. One relative told us how staff worked with the risk management plan for their family member to help minimise accidents and keep them safe in their care. Staff told us they understood the situations when people might be at risk because they read people's care plans and ensured that they supported them appropriately. We saw that people's care plans contained information about how staff should provide support to people to help keep them safe.

People and their relatives told us what they needed help and support with were met appropriately by

enough staff. For example where one person needed help from two members of staff they received it. That person said, "I have several calls a day, seven days a week and there are regular carers who support me in the week. On some calls where I need two carers I get them." Another person commented on their preference for having regular carers. They said, "I like having a regular person who knows me and who I know well. This helps me to feel safe and that's all I need." A relative said, "On the whole carers are regular and that's good for my [family member]. They prefer that and yes there do seem to be enough staff to provide the service in this way." Another relative said, "Staff come on time and if they are late they always let us know. They stay for the proper time and yes they do what they are supposed to do, no problems." This continuity of support was beneficial to people as they told us staff understood their needs and they said they received a very good level of care and support.

We inspected staff files to check that staff recruitment was undertaken appropriately. We saw the provider had taken appropriate steps to help protect people from staff who may not be fit and safe to support them. Before staff were employed the provider requested a number of checks including criminal records checks, two references, people's work histories, health checks, and identity checks as part of the recruitment process. Criminal records checks we saw had all been carried out within the last three years. The registered manager told us they made it a priority to ensure all the necessary checks were carried out as it was an important part of ensuring they did all they could to protect people.

## Is the service effective?

### Our findings

People received effective care because they were provided with support from an established and well trained staff team who had a good understanding of their needs.

Staff received support through one to one supervision meetings with the registered manager and through bi-monthly team meetings. We saw evidence of this as we were provided with the minutes of these meetings. Staff told us they could discuss their development, training needs and their thoughts on improving the service. They told us they were also given feedback about their performance. They said they felt supported by the manager who encouraged them to discuss their training needs and be open about anything that may be causing them concern.

However the records we saw for the one to one supervision meetings were brief and the registered manager agreed they needed to be expanded in order to maintain an accurate record of the discussion and support offered to staff. The registered manager told us that "spot checks" were carried out as a part of the supervision process and we saw records that evidenced this. The registered manager told us they intended to increase the frequency of the "spot checks" in order to better monitor actual staff practice and service user satisfaction of the service provided.

Staff told us team meetings were held, so the staff team could get together and discuss any areas of interest. This also allowed for any relevant information to be disseminated to staff members. Staff told us they had access to a wide variety of good and effective training. One staff member said, "When I started I had good induction training and I found this helpful to my understanding of my job." Another staff member said, "I have had a lot of training since working here. It has included moving and handling, safe administration of medicines, safeguarding, health and safety." The records we saw confirmed the provider had mandatory training which all staff had to attend and have updated when required. We saw staff were provided with professional development and specialised training such as for dementia, continence care and for the use of hoists. This enabled staff to support people with more complex needs. The staff we spoke with said it helped them provide a better service for people they supported. We spoke with the registered manager who confirmed staff training covered a range subjects. They included safeguarding, moving and handling, the Mental Capacity Act (MCA) 2005, first aid and food hygiene.

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. The registered manager demonstrated an understanding of the legislation as laid down by the Mental Capacity Act (MCA) 2005. We saw from our discussion with the registered manager they were aware of the need and the process to assess people's capacity.

Staff we spoke with demonstrated a good awareness of people's rights to decide how they might want their care and support to be provided. People told us they were asked for their consent before care and support

was given them.

The provider had arrangements to support people with eating and drinking where this was part of their care package. One of the people we spoke with received support with their meal preparations and shopping for food. Their care plan gave detailed information about their likes and dislikes with food and drinks. We saw from our inspection of the person's file that staff monitored if the person was eating and drinking well or whether they needed to be concerned about their intake or take action.

We saw people's care records included the contact details of their General Practitioner (GP) so staff could contact them if they had concerns about a person's health. We saw where staff had more immediate concerns about a person's health they accessed healthcare services to support the person. People we spoke with said their general health care needs were co-ordinated by themselves or their relatives. Staff were available to support people to access healthcare appointments if needed.

## Is the service caring?

### Our findings

People we spoke with and their relatives told us they were happy with the services they received. They said staff treated them with kindness, respected their privacy and their dignity and were caring towards them. One person said, "I am very happy with the service. My carer helps me with all my needs. She comes on time and does exactly what I need her to do." Another person said, "Staff are so willing to help me. They do go that extra mile for me." A relative said, "We are happy with the care provided, staff seem to really care about what they do for people."

The registered manager told us that since the last inspection the provider has worked to ensure people who use the service benefited from more consistency and continuity of the staff who supported people in their homes. This has been achieved through improved recruitment and selection processes and staff support. People we spoke with told us they appreciated the improvements made here. One person said, "I have a lot of help over the week and I get the same carers who understand me and who I now know quite well. It works really well for me." A relative said, "[family member] really likes having the same carers. The regular carers who support her have built a trusting relationship with her that she feels confident with."

People told us staff who supported them had up to date information about their needs and this was delivered in the way they wanted. One person we spoke with said, "I have a care plan that sets out all the care that my carer provides for me. I was involved in the review and I am happy with the care I get." A relative told us they were updated about the care of their family member and were asked to contribute to their care plan by the provider.

People supported by the service told us staff spoke with them in a respectful way and respected their privacy. One person we spoke with said, "My carers help me with my personal care because I am unable to do this for myself. The staff treat me with courtesy and care. They respect my privacy and my dignity. I am very happy with the care staff give me." A relative said they were so impressed with the care they received that when their [family member] needed support because their health had deteriorated they had no hesitation in recommending the provider to them. We saw when speaking with staff that they had an appreciation of people's individual needs around privacy and dignity. They told us they had received training around respecting people's privacy and this was a high priority for the service.

The registered manager told us that people were provided with an information handbook that gave them important information about the aims and objectives of the services provided for them. When we spoke with people they confirmed they had received the handbook and said it was an important source of information for them.

Staff also told us they received a staff handbook that set out all the providers' policies and procedures and which they said was a useful source of information for them to reference when needed.

## Is the service responsive?

### Our findings

We asked people and their relatives for their views about the service and how the service made sure they received care and support that met their needs. They said they received an assessment visit from the registered manager before their care package started. They said they spent time talking about their needs, likes and dislikes and preferences for meeting their care needs.

The staff we spoke with had an in depth knowledge of people's care and support needs and how these had changed over time. Staff told us they were provided with sufficient information about people's needs and were updated when anything had changed. The care plans we inspected contained detailed and up to date information about people's needs. People and their relatives were involved in the reviews of their care. A relative said, "They review my [family member's] care plan when their needs change. We are involved in the process as well." Another person told us, "The agency came and assessed my needs and the associated risks and then provided me with a care plan that I agreed to. When my needs changed so was my care plan."

The people we spoke with and their relatives told us they felt comfortable raising concerns and making a complaint and knew how to do this if needed. One person said, "I have never needed to make a complaint but if I did I would certainly speak to the manager." The relatives we spoke with also felt they could make a complaint if required, but had not needed to do so.

We saw that the service had a formal complaints policy and procedure. The complaints procedure clearly outlined what a person should expect if they made a complaint. There were guidelines as to how long it should take the service to respond to and resolve a complaint. The policy mentioned the use of advocates to help support people who might find the process of making a complaint difficult. The procedure also outlined the process for the complainant to follow if they were not satisfied with the outcome of the provider's investigation into their complaint.

The registered manager explained that if a complaint or concern arose it was the provider's policy to try to resolve the matter as soon as possible informally. The service had a record of all previous complaints. When we examined this we found that the service complied with its own policy in terms of resolving complaints in a timely manner.

## Is the service well-led?

### Our findings

At this inspection the service was managed by a suitably experienced and qualified manager who was registered with the Care Quality Commission. The people and the staff we spoke with said the service was well managed. People and their relatives said that they had frequent contact with the office and the registered manager. They said the staff were very approachable and committed to providing a good service for them. They said there was an open and transparent culture at the service. The service provided was person centred and met the needs of the people they supported. If they had a concern they felt they would be listened to and responded to appropriately. This showed that the service used the feedback from people to improve the services provided. Staff told us that they enjoyed working for the agency. They said it was professional and well managed.

The registered manager told us that they took seriously the need to continuously monitor the quality of the services they provided so that they had the information they needed to make improvements where they were needed. We saw there was a range of different methods in place to do this. An annual feedback survey was carried out for people who used the service and their relatives. They were asked for their views about the services provided. We were shown the evidence gained from the last feedback survey carried out in June and July 2017 in the returned feedback forms. All the returns were positive about the service. One person said, "I am extremely pleased with what is an exemplary service." Another person said, "Very happy with this service." A relative commented, "No-one is perfect but this is a good service." Another relative said, "We have found Lakeshore Care very helpful to us."

We also saw evidence of "spot checks" made to people to see how care was actually being provided to people by staff. The registered manager told us if any concerns were identified during spot checks this was discussed with individual staff members during one to one meetings so the concerns were addressed.

Staff told us they felt confident calling into the office to speak with the registered manager. The staff we spoke with said they knew they could call in the office any time they needed to and they told us that communication with the registered manager was good. Staff said that this helped them to feel supported in their work and to be clear on the values and ethos of the organisation.

We saw staff were required to read the provider's policies and procedures and then sign to say they understood. This helped staff to keep up to date with all aspects of carrying out their work and of the procedures to do with caring for and supporting people.

All the records that we inspected in the provider's office were well maintained and we found that the information we required to see was easy to access and chronologically stored. This reflected on a well organised and efficiently run domiciliary care service.

The provider had sent us written notifications telling us about important events that had occurred in the service when required. They are legally obliged to send us notifications of incidents, events or changes that happen to the service within a required timescale. This means that CQC were able to review the notifications

and decide whether any action was needed on their part.