

L&Q Living Limited

Sale Point

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

About the service

Sale Point is a domiciliary care agency and also provides care and support to people living in specialist 'extra care' housing. The service provides personal care to people living in their own homes in the community or within the extra care schemes. CQC does not regulate premises used for extra care housing; this inspection looked at people's personal care and support service.

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.

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

People who used the service told us they felt safe. Risk assessments were in place where people had specific medical conditions. Staff had received safeguarding training and knew how to raise any concerns. Medicines had been administered safely and staff had received appropriate training in this area.

Staff had a clear understanding of infection control practices they were to follow. Regular one to one supervisions had been conducted and a variety of training had been provided to ensure staff were supported and had the skills and knowledge to carry out their roles.

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.

People told us staff were kind and caring and treated them with dignity and respect. Care plans contained person-centred information. Regular reviews of people's care and support had been completed to ensure people's needs were being met. A complaints procedure was in place and people told us they knew how to raise a concern.

The registered manager had requested feedback from people who used the service. Quality assurance processes were in place and these had been effective in identifying shortfalls. Staff told us the management team were approachable and they had an open-door policy. People who used the service said they were listened to and respected. They told us they felt the service was well-led by an experienced management team.

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

Rating at last inspection

The last rating for the service under the previous provider was good, published on 5 November 2018.

Why we inspected

This inspection was prompted by a review of the information we held about this service.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Sale Point on our website at www.cqc.org.uk.

Follow up

We will continue to monitor information we receive about the service, which will help inform when we next inspect.

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 safe.

Details are in our safe findings below.

Good ●

Is the service effective?

The service was effective.

Details are in our effective findings below.

Good ●

Is the service caring?

The service was caring.

Details are in our caring findings below.

Good ●

Is the service responsive?

The service was responsive.

Details are in our responsive findings below.

Good ●

Is the service well-led?

The service was well-led.

Details are in our well-led findings below.

Good ●

Sale Point

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 Health and Social Care Act 2008.

Inspection team

This inspection was carried out by one inspector.

Service and service type

This service provides personal care to people living in their own houses and flats, including specialist 'extra care' housing. Extra care housing is purpose-built or adapted single household accommodation in a shared site or building. The accommodation is bought or rented and is the occupant's own home. People's care and housing are provided under separate contractual agreements.

Registered Manager

This provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations.

At the time of our inspection there was a registered manager in post.

Notice of inspection

We gave the service 48 hours' notice of the inspection. This was because we needed to be sure that the provider or registered manager would be in the office to support the inspection. We wanted to be sure there would be people at home to speak with us.

Inspection activity started on 3 November 2023 and ended on 6 November 2023. We visited the service on 3 November 2023.

What we did before the inspection

The provider was not asked to complete a Provider Information Return (PIR) prior to this inspection. A PIR is information providers send us to give some key information about the service, what the service does well and improvements they plan to make. We asked the local authority and the local Healthwatch team to share feedback about the service. 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 this information to plan our inspection.

During the inspection

We spoke with 3 people who used the service and 1 relative. We also spoke with six staff including the regional manager, the registered manager, a senior carer and three care staff. We reviewed feedback that was prompted by inspection activity from 1 relative, 1 professional visitor and 2 further staff members.

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 of this service under the current registration. 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

- People were protected from the risk of abuse. Staff had received training and were confident of the process to follow if they had any safeguarding concerns. One staff member commented; "We do regular training in safeguarding and I would not hesitate to tell the management team if I was concerned about anything."
- There was a safeguarding policy in place which included local safeguarding contact details and outlined the various types of abuse. The provider shared that they had introduced a video version of safeguarding information to promote accessibility.
- People told us they felt safe. Comments included "I feel safe and feel I can tell the staff any concerns" and "I am very happy here. I am safe because staff are only a call away and the service seems very secure."

Assessing risk, safety monitoring and management; Learning lessons when things go wrong

- The registered manager ensured that risk assessments were completed to inform staff of any risks. Risk assessments were detailed, reviewed regularly, and provided guidance on how to support people safely.
- The provider held a monthly health and safety forum to review incidents.
- Accidents and incidents were recorded, reviewed and action was taken to mitigate the risk of reoccurrence. The provider shared that safeguarding incidents are subject to a robust lessons learned and serious case review system.
- Feedback from people and staff was listened to and acted on to improve the service. Feedback surveys were issued 6 monthly.
- The management team had a clear system to monitor care calls to help ensure they were not missed.

Using medicines safely

- People told us they were supported with their medicines appropriately.
- Staff were trained to administer medicines. Spot and competency checks were carried out regularly to check staff were continuing to work in line within good practice guidelines.
- The management team ensured that Medicine Administration Records (MARs) were regularly audited. The manager followed up on any actions.
- The registered manager had identified an issue with the internet quality in the building which had resulted in some anomalies on the MARs. The team had responded by having a paper back up copy of these records.

Staffing and recruitment

- The provider was a large organisation and there was a human resources department to support the registered manager with any HR processes. The registered manager told us they verified that staff had all

had the necessary checks to ensure they were safe to work with people before they commenced employment. This helped ensure a robust approach to managing recruitment.

- The provider shared that staff were not confirmed in post until they completed the care certificate and an internal probation programme.
- There were enough staff available to meet people's needs safely. People said they felt staffing was consistent and that staff knew how to meet their needs well.

Preventing and controlling infection

- We were assured that the provider was supporting people living at the service to minimise the spread of infection.
- We were assured that the provider was using PPE effectively and safely.
- We were assured that the provider was responding effectively to risks and signs of infection.
- We were assured that the provider was making sure infection outbreaks can be effectively prevented or managed.
- We were assured that the provider's infection prevention and control policy was up to date.

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 of this service under the current registration. 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

- Assessments of people's needs were completed before a package of care was agreed. This was to ensure that the service could meet people's needs. The registered manager told us that they kept equipment on site. For example, falls detectors and staff call pendants for people who were unsteady on their feet.
- People and relatives were involved in the assessment of their needs. One relative told us that staff consulted with them and kept them fully updated in line with their loved one's wishes.
- People were involved in regular reviews to make sure care plans reflected their current needs.

Staff support: induction, training, skills and experience; Supporting people to eat and drink enough to maintain a balanced diet

- People were supported by staff who had received training appropriate to their role. One staff member said, "The training program is comprehensive and we have an online portal which shows us when our refresher courses are due."
- Staff told us they had regular supervision sessions with their manager. Out of Hours staff had an on-call provision so they could seek support at any time.
- People felt staff were skilled. One person said, "The staff seem to know what to do in any given situation, they seem very experienced."
- Staff supported people to meet their nutritional and fluid intake needs as specified in the care plan and as people wished. One person said, "They support me with meals as I am not always able to make things myself."
- Staff understood people's dietary needs and associated risks were planned for. For example, allergies or risk of choking.

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

- A professional visitor told us, "The staff are knowledgeable about the people they support and they have a flexible approach. Health interventions have previously been managed efficiently and effectively."
- Staff worked alongside other agencies to provide person-centred and effective care. From records seen, we could see staff worked closely with other agencies such as local authorities and social workers. Care plans and records showed that staff also worked collaboratively with other agencies such as physiotherapists and occupational therapists.

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 MCA 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.

- People using the service had full capacity to make decisions about their care.
- People told us they were involved in making decisions about the care and support they received.

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 of this service under the current registration. 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

- Staff followed people's care plans which were person-centred and reflected people's individuality.
- All the people we spoke with were complimentary about the care they received. One person said, "The team are brilliant, we have a laugh, I would recommend them to anyone. They make sure I am okay and cheer me up every day."
- Relatives also told us that staff were caring. One person's relative told us, "[Name] is treated with compassion and respect. Staff are just wonderful. This is how care should be. They are outstanding." Another relative said, "Staff go above and beyond to support [Name] and the whole family. They are flexible around their needs and appointments and have developed a great rapport with them."
- The provider had developed a new equality, diversity and human rights policy which included extra safeguards for vulnerable people from minority groups.

Supporting people to express their views and be involved in making decisions about their care; Respecting and promoting people's privacy, dignity and independence

- People and their relatives told us they were asked for their views and were supported to make decisions about the care and support they received.
- People told us staff asked how they would like to be supported on each visit. This meant that people were in charge of the care they received.
- People we spoke with gave examples of how staff maintained their privacy and dignity. One person said, "Staff always treat me with dignity and encourage me to do as much as I can for myself. They are there on the days I can't manage things."
- Staff encouraged people to maintain their independence and do as much for themselves as they could. People were referred to other healthcare professionals when it was identified that equipment and adaptations might further support them to retain their independence. A 'tech smart' apartment featured the latest assisted technology to help optimise people's independence.
- The registered manager shared many positive outcomes from their reablement provision which aimed to support people to recover their skills and confidence following an acute change of need, illness or injury. The initiative had led to reduced periods spent in hospital, a reduction of the number of people permanently admitted to long term care from hospital and an increase in people's independence and daily living skills.

Is the service responsive?

Our findings

This is the first inspection of this service under the current registration. 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; End of life care and support

- People were empowered to have as much control and independence as possible, including developing their care and support plans. Staff were knowledgeable about people and their needs. The provider's care and support plan policy stated that people can have their care plan reviewed at any time they chose.
- Daily notes and monitoring were completed which gave an overview of the care people had received and captured any changes in their health and well-being.
- The registered manager informed us no one was receiving end of life care at the time of our inspection. We saw care plans contained information in relation to people's future wishes. If required, they would be able to put these arrangements in place.

Meeting people's communication needs

Since 2016 all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard. The Accessible Information Standard tells organisations what they have to do to help ensure people with a disability or sensory loss, and in some circumstances, their carers, get information in a way they can understand it. It also says that people should get the support they need in relation to communication.

- Care plans included a section for detailing people's communication abilities and needs. Staff understood people's communication needs.
- The provider could provide a range of accessible documents to support people's communication needs. For example they had commissioned a film maker to design video policies to assist people with additional sensory needs.

Supporting people to develop and maintain relationships to avoid social isolation

- The provider had an inclusion initiative to combat loneliness and isolation and offered a range of free activities. For example, pet therapy sessions had been set up regularly to support wellbeing. There was also a 'silver listeners' initiative where people could listen to children from the local community read stories over the telephone.
- People told us that they did not feel isolated. One person told us, "It's perfect really, I can have my own space in my apartment or I can join in some of the group activities that are going on." Another person said, "The staff ensure I know about events and activities and can help me attend if I wish." The care team and people living at the schemes had successfully raised money for national charities by holding coffee mornings and other events.

Improving care quality in response to complaints or concerns

- People told us they knew how to make a complaint. There was a complaints policy in place. Information about how to make a complaint was included in the customer service brochure and an accessible

complaints policy was available.

- The registered manager told us complaints would be logged, and actions taken to address them recorded.
- Although there had not been any recent complaints logged there was a system for auditing and learning from complaints.

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 of this service under the current registration. 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; Continuous learning and improving care

- People and relatives told us there was a positive and open atmosphere. One person told us, "It is like a big family here and the staff are approachable."
- Staff told us they felt well supported and they were able to discuss any concerns with the registered manager or senior team.
- All staff told us they worked well as a team. One staff member said, "Everyone works together really well. We have supported each other through the pandemic and the provider changes and managed to keep the quality of care consistent for our customers."

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

- Quality assurance systems were in place to monitor the quality and safety of the service. Team leaders supported the manager and provider in completing audits of all aspects of the service.
- People and their relatives told us they were kept informed about anything that might affect their care and support. The provider shared information with them if things went wrong.
- The registered manager understood when to inform CQC of events that happened in the service in line with their statutory responsibilities.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements

- The registered manager and staff understood their roles and responsibilities. Monthly and quarterly reports were produced by the senior management team to review and influence policy changes.
- Staff strived to ensure care was delivered in the way people needed and wanted it. The provider had been awarded an 'Investors in people' - silver status, showing the provider's commitment to employee development and culture.
- There was effective communication maintained between the registered manager, senior care staff and care staff. There were daily handovers to share information.
- Staff felt respected, valued and supported and that they were fairly treated. One staff member said, "We have regular team meetings, and everyone has an opportunity to make recommendations or raise any concerns." Staff were actively encouraged by the registered manager to raise any concerns in confidence one staff member told us, "I would have no issue in raising concerns."
- The ethos of the service was to be open, transparent and honest. Staff told us the registered manager and

senior care staff led by example.

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

- People told us they were asked for their opinion about the service. They told us they felt the managers were effective and approachable.
- Staff said any suggestions they might have about the service were listened to and acted on. The provider's survey analysis showed that 86% of the team staff team said that L&Q Living Limited was a great place to work. Staff were empowered to make decisions about the service via the 'ideas hub' and there were regular opportunities to share their views at tea with the senior leadership team.

Working in partnership with others

- The service worked in partnership and collaboration with other key organisations to support re-ablement care provision, joined-up care and service development. Stakeholders included; the local authority, physiotherapy and occupational therapy professionals and local GPs. Systems were in place and used effectively to continuously identify, analyse, monitor and review risks so people were provided with good care.
- The care team worked co-operatively with staff from other agencies working in the building the service was based in.
- The registered manager complimented the whole team and said they were proud of the work that had taken place since the last inspection.