

SH Senior Care Ltd

Home Instead Senior Care Lancaster

Inspection report

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17 August 2022

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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

Home Instead Senior Care Lancaster is a care agency providing personal care and support to people living in their own homes. At the time of our inspection there were 31 people using the 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. At the time of our inspection 13 people were in receipt of personal care.

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

People told us they felt safe as a result of the care they received from staff. The provider had recruited staff safely by following robust recruitment procedures. Staff supported people to keep safe because they followed the provider's risk assessments. People received their medicines as prescribed from staff whose competencies had been checked regularly.

People were confident staff knew about their needs and preferences because they were supported by the same staff the majority of the time. Staff had access to people's assessments and care plans which could be quickly updated electronically.

People received compassionate care from kind and caring staff. Staff were on time and stayed the full length of the planned visit. People praised the sensitivity of staff who ensured they felt comfortable during personal care.

People told us they thought the service was well managed and they could not think of anything that needed to improve. Staff felt valued and respected by the management team and were happy to work for the agency. Staff commented on how the values of the organisation really represented what high-quality care should be.

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.

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

Rating at the last inspection

This service was registered with us on 15 July 2021 and this was the first inspection.

Why we inspected

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

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 ●

Home Instead Senior Care Lancaster

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

The inspection was completed by one inspector.

Service and service type

This service is a domiciliary care agency, providing personal care to people living in their own homes.

Registered Manager

This service is required to have a registered manager. A registered manager is a person who has registered with the Care Quality Commission to manage the service. 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.

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

Notice of inspection

We gave the service 24 hours' notice of the inspection. This was because the service is small, and people are often out, and we wanted to be sure there would be people at home to speak with us.

Inspection activity started on 11 August and ended on 17 August. We visited the location's office on 11 August and made telephone calls to clients, relatives and staff on the 17 August.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from professionals who work with the service. We used the information the provider sent us in the provider information return (PIR). This is information providers are required to send us annually with key information about their service, what they do well, and improvements they plan to make. We used all this information to plan our inspection.

During the inspection

We spoke with the registered manager, the client experience manager and the nominated individual. The nominated individual is responsible for supervising the management of the service on behalf of the provider. We spoke with the relatives of three people. We spoke with three care staff. We reviewed a range of records which included the care records of three people, the recruitment records of three staff, safeguarding and incident reports and records relating to the quality and governance of the service.

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 newly registered service. This key question has been rated good. This meant people were safe and protected from avoidable harm.

Assessing risk, safety monitoring and management

- People were protected from the risk of harm because the provider ensured risks were assessed and plans put in place to mitigate them. One person's risk assessment had not been fully completed or reviewed. We discussed this with the registered manager who addressed this immediately.
- People's relatives told us they felt safe as a result of the care they received from staff. Staff told us they felt there was enough information in care records to help ensure they supported people safely.

Systems and processes to safeguard people from the risk of abuse

- People were protected from abuse because the provider followed robust safeguarding procedures.
- Staff understood how to recognise any concerns because they had received training and guidance from the provider.
- Staff understood how to raise safeguarding concerns within the service or directly with the local authority if required.

Staffing and recruitment

- People were supported by suitable staff because the provider followed their own robust recruitment procedures.
- Recruitment records we looked at were thorough and complete. All necessary pre-employment checks had been completed.
- People were supported by enough staff and for the right amount of time. Relatives we spoke with said staff always stayed for the full length of the planned visit.

Using medicines safely

- People received their medicines as prescribed from trained staff.
- Medicine records were completed properly.
- Medicine errors had been identified and recorded by staff. Medical advice was sought by staff when required.

Preventing and controlling infection

- People were protected from the risk of infection because the provider ensured staff were trained and understood the risks. Staff were provided with the necessary personal protective equipment (PPE).
- The provider ensured staff followed the most recent government guidance in relation to the COVID-19 pandemic.

Learning lessons when things go wrong

- People were protected from the risk of reoccurrence of incidents and accidents because the provider had robust procedures in place to learn from any incidents.
- Staff recorded in detail any injuries or blemishes people appeared to have on body maps and photographs.

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 for this newly registered service. 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; Staff working with other agencies to provide consistent, effective, timely care

- People received effective care from staff because their needs and preferences had been thoroughly assessed by the provider.
- People's relatives told us they had been fully involved in discussions about their care and how they preferred to be supported.
- Staff told us the care plans included enough information to guide them when supporting people. Staff also told us they found the electronic system accessed via secure social media to be effective and informative.
- Care records included information and guidance from other professionals supporting people.

Staff support: induction, training, skills and experience

- People received effective care from suitably trained and skilled staff because the provider ensured staff completed a robust induction training programme.
- People's relatives told us they were confident staff were skilled and knowledgeable when supporting their relation.
- Staff received regular support and supervision from managers to help their ongoing development and learning.

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

Supporting people to live healthier lives, access healthcare services and support

- People who needed assistance were supported eat and drink enough by staff. Staff kept accurate records of food and drink taken during visits.
- People's health needs were identified by the provider's assessment procedures. Care records included clear information about the support people needed to maintain their health.
- Staff supported people, when required, to make and attend health appointments.

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.

- We found the service was working within the principles of the MCA. At the time of this inspection no one receiving a regulated activity lacked capacity to make their own decisions.

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 for this newly registered service. 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 were supported by kind and compassionate staff. People's relatives told us, "Staff are kind." and "Staff are very nice."
- People's equality and diversity needs were upheld because the provider ensured information about what was important to people had been recorded.
- A staff member told us, "The values of the organisation are really good in the way they respect people and the way we address them."

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

- People had been supported to express their views and be involved in making decisions that mattered to them.
- Staff were skilled in supporting people to communicate and make choices.
- One staff member said; "We just go with what people want to do, it's their way. We use images and encourage communication and listen."

Respecting and promoting people's privacy, dignity and independence

- People's relatives complimented the staffs' skills in supporting their relation to maintain their dignity. One relative said, "I was concerned how [name] would feel about having care however, they are very kind and don't make [name] feel uncomfortable in any way."
- People's information was kept securely because the provider ensured they followed effective information management which met General Data Protection Regulation (GDPR).

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 for this newly registered service. 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

- People received person-centred care because the providers assessment procedures involved people and their relatives in deciding what they wanted support with and how they preferred this to be delivered.
- Staff were committed to supporting people in the ways people preferred. Staff had time to chat and offer companionship during visits.

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.

- The service had met this standard. Information was available in a variety of formats.
- Staff were skilled in supporting people to communicate and express their views.

Improving care quality in response to complaints or concerns

- The provider had an effective complaints procedure in place which was followed by the management team. Any complaints had been recorded and responded to in line with the procedure.
- People's relatives told us they felt comfortable raising anything at any time and had not felt the need to raise a formal complaint.

End of life care and support

- No-one was in receipt of end of life care at the time of our inspection.
- If required, the registered manager would assess each person individually and work in conjunction with community based health professionals.

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 consistently managed and 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

- The provider had clear systems in place to monitor the quality of care and care records. A recent quality audit had been completed by the organisation's quality support manager. All issues had been addressed in a timely manner.
- Managers completed spot checks of staff during visits which helped ensure people received consistent high-quality support.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people; Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- The registered manager and staff team were fully committed to the values of the organisation which aimed to provide high-quality person-centred care.
- People's relatives praised the quality of care provided and said it was better than any they had seen before.
- Staff felt valued and respected by the registered manager and were proud and happy to work for the agency.
- People were encouraged to give their views and feedback about the quality of the service they received.
- The provider ensured people were visited shortly after the start of their service and their views sought.
- People's relatives and staff said they found the management team supportive and approachable.

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 was aware of their obligations in relation to the duty of candour.
- People's relatives told us they were kept up to date at all times.
- The registered manager had reported incidents to appropriate agencies when needed, including CQC and the local authority safeguarding team.

Continuous learning and improving care; Working in partnership with others

- Additional learning from outside of the service was sought by the registered manager when it was felt more appropriate than the in-house training or something more bespoke and specialist was needed.
- The management team worked in partnership with the provider and were able to access organisational expertise when required.