

Mr John Toolan

The Local Care Agency

Inspection report

130 Blakiston Street
Fleetwood
Lancashire
FY7 6LQ

Tel: 01253874056
Website: www.thelocalcare.co.uk

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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:

The Local Care Agency provides domiciliary services to people who require support in their own home. Care is provided to a wide range of people in the community and also provides assistance for carers. The service operates seven days a week and has out of hours contacts.

People's experience of using this service:

People and relatives told us they felt safe whilst using the service. A relative commented, "They make sure [my relative] is secure in her home and they look after her safety." Staff files we looked at confirmed staff had safeguarding training to protect people from poor care or abuse.

The management team had good procedures to monitor and reduce accidents and incidents. Care plans we reviewed included control measures intended to mitigate the risk of unsafe support.

Personnel files evidenced the management team used the same safe recruitment procedures we found at our last inspection. Staff confirmed there were sufficient staffing levels because they had time to complete visits in a calm and unhurried way.

Staff demonstrated a good understanding of their duties to prompt people who lived in their own homes to take their medication. This assisted them to protect people from the unsafe management of medicines.

We found the registered manager was referencing current legislation, standards and evidence-based guidance to achieve effective outcomes. Staff told us training provision gave them the skills to complete their duties.

Where nutritional support formed part of a person's care package, we saw the management team had guided staff to meet their needs.

People who used the service and relatives stated staff engaged with other organisations to help provide consistent care. We found care plans focused on maintaining their independence in all aspects of their support.

People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible. The policies and systems in the service supported this practice.

We observed staff were kind, friendly and patient with people they supported. Those who used the service and their relatives said staff had a caring attitude. One person told us, "Nothing is too much trouble, they go the extra mile."

Care records were personalised to the individual's needs and support requirements. Information collected

was used to develop agreed support packages with the person or their representative's consent.

Staff told us the management team worked with them to gain insight into people's support. They said the registered manager was approachable and listened to their comments. One staff member stated, "The managers are lovely. They work with us and are supportive and approachable."

The management team regularly completed service quality assurance audits to check everyone's safety and wellbeing. People who used The Local Care Agency told us they felt included in service development. Rating at last inspection: Good (report published 24 September 2016).

Why we inspected: This was a planned inspection based on the rating at the last inspection. The service remained rated good overall.

Follow up: We will continue to monitor intelligence we receive about the service until we return to visit as per our re-inspection programme or if any issues or concerns are identified.

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
Details are in our Safe findings below.

Is the service effective?

Good ●

The service was effective
Details are in our Effective findings below.

Is the service caring?

Good ●

The service was caring
Details are in our Caring findings below.

Is the service responsive?

Good ●

The service was responsive
Details are in our Responsive findings below.

Is the service well-led?

Good ●

The service was well-led
Details are in our Well-Led findings below.

The Local Care Agency

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. This inspection was planned to check whether the provider was meeting the legal requirements and regulations associated with the Act, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

Inspection team:

This inspection was carried out by one adult social care inspector and an expert by experience. An expert by experience is a person who has personal experience of using or caring for someone who uses this type of care service. The expert by experience for the inspection at The Local Care Agency had experience of caring for individuals who lived in their own home.

Service and service type:

This service is a domiciliary care agency. It provides personal care to people living in their own homes. It provides a service to people of all ages.

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:

This comprehensive inspection visit took place on 13 February 2019 and was announced. We gave 48 hours' notice of the inspection to ensure people who used the service, staff and visitors were available to talk with us.

What we did:

Before our inspection we completed our planning tool and reviewed the information we held on the service. This included notifications we had received from the provider about incidents that affect the health, safety and welfare of people supported by the service and previous inspection reports.

We also checked to see if any information concerning the care and welfare of people supported by the

service had been received. We contacted the commissioning department who used The Local Care Agency. This helped us to gain a balanced overview of what people experienced whilst using the service.

As part of the inspection we used information the provider sent us in the Provider Information Return. This is information we require providers to send us at least once annually to give some key information about the service, what the service does well and improvements they plan to make.

During the inspection we spoke with a range of people about The Local Care Agency. They included three people who used the service, eight relatives, two members of the management team and five staff.

We looked at records related to the management of the service. We did this to ensure the management team had oversight of the service and they could respond to any concerns highlighted or lead The Local Care Agency in ongoing improvements. We checked care records of four people who used the service. We also looked at staffing levels, recruitment procedures and training provision.

Is the service safe?

Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm

People were safe and protected from avoidable harm. Legal requirements were met.

Systems and processes to safeguard people from the risk of abuse

- ☐ People and relatives we spoke with told us they felt safe whilst using the service. One relative said their family member was, "Much safer than I could manage him, we have had no problems with that."
- ☐ The management team had effective safeguarding systems. When we discussed relevant principles with staff, we found they understood reporting procedures. One employee stated, "I'd report it, without a shadow of a doubt. If I don't then I am as guilty as the offender."
- ☐ Staff files we looked at confirmed staff had safeguarding training to protect people from poor care or abuse. This guided them to ensure those who used the service were safe.

Assessing risk, safety monitoring and management

- ☐ Care plans we reviewed contained basic information to manage risks to people of inappropriate or unsafe care. This included control measures intended to mitigate risk.
- ☐ The management team had good procedures to monitor and reduce accidents and incidents. People said they felt safe when being supported. A relative told us, "Oh yes, [my family member] hasn't had any accidents, they treat her in a safe manner."

Staffing and recruitment

- ☐ Personnel files evidenced the management team used the same safe recruitment procedures we found at our last inspection. This included full employment history, references and criminal record checks.
- ☐ People and relatives told us they received care from staff they had bonded with because they regularly supported them. Staff confirmed there were sufficient staffing levels because they had time to complete visits in a calm and unhurried way.

Using medicines safely

- ☐ Staff demonstrated a good understanding of their duties to prompt people who lived in their own homes to take their medication. A relative verified, "The staff sort her medication out for her and make sure she has taken them in front of them."
- ☐ We saw evidence staff had training to underpin their skills. The management team provided relevant guidance, such as National Institute for Health and Care Excellence (NICE) 'Managing medicines for adults receiving social care in the community' guidelines.
- ☐ The registered manager had systems to protect people from the unsafe management of medicines. For example, they regularly completed competency checks to ensure staff remained skilled and knowledgeable.

Preventing and controlling infection

- ☐ Staff received training and guidelines on preventing infections and cross-contamination to people who

lived in their own homes. We saw ample equipment, such as disposable gloves, was made available to them in the provision of safe personal care and support.

Learning lessons when things go wrong

- The registered manager and staff team were keen to review lessons learnt to improve care delivery. For instance, following a recent accident, the management team had improved related training to enhance staff skills.

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.

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

- ☐ We found the registered manager was referencing current legislation, standards and evidence-based guidance to achieve effective outcomes. This included NICE guidelines on various topics, such as medication and infection control.
- ☐ Care records contained pre-admission and ongoing assessments of people's support requirements to ensure care planning met their needs. A person who used The Local Care Agency told us, "You have continuity with them and you can leave them to get on with what they are doing."

Staff support: induction, training, skills and experience

- ☐ People and their relatives told us staff were well-trained and experienced in their duties. A relative said, "Oh yes, they know what they are doing."
- ☐ The registered manager provided a range of training to support staff in their roles. When we discussed this with staff, they confirmed training and guidance gave them the skills to complete their duties. One employee stated, "The training is all face-to-face and working in groups. It's good and important in giving you confidence and insight into what you're doing."

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

- ☐ Where nutritional support formed part of a person's care package, we found the management team had incorporated this in their care plan. This guided staff to meet the individual's needs.
- ☐ We noted staff were knowledgeable about the safe preparation of food and had relevant training to underpin their skills. One staff member commented, "I've done my food hygiene so I prepare food safely."
- ☐ People who used The Local Care Agency told us they were provided with healthy meals and were consistently offered a choice of what to eat. One person said, "I tell them what I want and they do it. I have healthy meals cooked from scratch because I don't like ready meals."

Staff working with other agencies to provide consistent, effective, timely care

- ☐ Care records we looked at contained details of other healthcare professionals involved in the person's support, such as their GP and social worker. People we spoke with confirmed staff referred to other agencies in a timely way to maintain the continuity of their care.

Adapting service, design, decoration to meet people's needs

- ☐ We assessed how the registered manager identified, recorded and met communication and support needs of people with a disability, impairment or sensory loss. Staff endeavoured to make information accessible where this was required, such as easy read, large print, sign language and speech-to-text-reporting.

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

- People's care plans focused on maintaining their independence in all aspects of their care. This included, where appropriate, the involvement of other healthcare professionals.
- Those who used the service and relatives stated staff engaged with other organisations to help provide consistent care. A relative commented, "They do refer her if they have any concerns of any sort. They ring me and they will get her a doctor."

Ensuring consent to care and treatment in line with law and guidance

- People who lack mental capacity to consent to arrangements for necessary care or treatment can only be deprived of their liberty when this is in their best interests and legally authorised under the MCA. The Deprivation of Liberty Safeguards (DoLS) do not currently apply in settings such as domiciliary care where people are resident in their own homes and so any deprivation of liberty may only be undertaken with the authorisation of the Court of Protection (CoP).
- At the time of our inspection, none of the people who used The Local Care Agency had an authorised CoP or DoLS in place. The registered manager and staff had a good working knowledge of the MCA and completed related training to strengthen their awareness.
- People who used the service told us staff sought their consent before providing assistance. One person said, "They always check first, is it ok, is it alright if we do this now."

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

People were supported and treated with dignity and respect and involved as partners in their care.

Ensuring people are well treated and supported; equality and diversity

- ☐ We observed staff were kind, friendly and patient with people they supported. Those who used the service and their relatives said staff had a caring attitude. One person commented, "I like the staff, they are like my family. They are really friendly and treat me with respect."
- ☐ Information and guidance about the service made available to people highlighted an approach that respected their diversity and human rights. For instance, the service user rights sheet made reference to respect for cultural, religious and emotional needs.
- ☐ Staff we talked with demonstrated a good awareness of protecting people's human rights. We saw evidence this was underpinned by equality and diversity training and a range of relevant policies, including one about gender reassignment.

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

- ☐ The Local Care Agency stressed in their service user guide staff must enable people to make their own decisions and complete support with them, not for them. This showed their commitment to inclusive care. Care records also evidenced people's choice and consent to their support.
- ☐ People said they felt fully involved in their care planning and development. One person stated, "[The registered manager] is really good. He treats me with a lot of respect, like an equal."
- ☐ Information materials provided by the service gave people details about advocacy services. Consequently, they could access this if they required support to have an independent voice.

Respecting and promoting people's privacy, dignity and independence

- ☐ People and relatives we spoke with commented care was focused on maintaining their self-determination. A person who used the Local Care Agency told us, "I love it. I am independent, but the staff are around to help me where I need it and for good company."
- ☐ We saw the service had strong systems to protect people's privacy. For instance, records were securely stored and the service user guide referred to the importance of maintaining each person's confidentiality.

Is the service responsive?

Our findings

Responsive – this means we looked for evidence that the service met people's needs.

People's needs were met through good organisation and delivery.

Planning personalised care to meet people's needs, preferences, interests and give them choice and control

- ☐ Care records were personalised to the individual's needs and support requirements. These included an assessment of all areas of care, which was used to develop agreed support packages with the person or their representative's consent.
- ☐ We saw evidence care records were informative and regularly reviewed to ensure support continued to meet people's needs. When we discussed this with those who used the service, one person told us, "They update it all the time. Say if I went in hospital and a nurse had to come to see me, it would go straight into my care plan."
- ☐ We found staff had a good awareness of people's social skills and required support. This included assistance to go out for walks and to spend time interacting on a day-to-day basis. A person who used the service said, "I am not very mobile but I go for a walk with [a staff member]. Nothing is too much trouble for her. It is all about me and what I need."

Improving care quality in response to complaints or concerns

- ☐ Detailed information in the service user guide helped people to understand how they could comment on the service. This included the various steps the provider would take to address them. One person told us, "I have rung the office with niggles, and they have solved them."

End of life care and support

- ☐ At the time of our inspection, The Local Care Agency did not provide support for anyone on end of life care. The service's emergency procedures guided staff about what to do in the event of a person's death. We found staff had related training to enhance their knowledge.
- ☐ We saw a relative recently sent the registered manager a thank you card following a bereavement. They commented, 'A massive thank you to all the girls who cared for [the person who used the service] during her last few days.'

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

The service was consistently managed and well led. Leaders and the culture they created and promoted high-quality, person centred care.

Planning and promoting person-centred, high-quality care and support; and how the provider understands and acts on duty of candour responsibility

- ☐ We saw the registered manager and owner had an in-depth awareness of each person's needs and backgrounds. Staff told us the management team worked with them to gain insight into people's support. One staff member said, "The managers are very involved. They know the service users' needs because they'll work out in the field."
- ☐ People and relatives we spoke with confirmed there was good interaction between them and the management team. One relative commented, "Yes, the managers come around to discuss things and ask questions and I phone them up and have a natter."

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

- ☐ The service had clear lines of responsibility and accountability. This included notifying CQC of any incidents in line with the regulations.
- ☐ The management team regularly completed service quality assurance audits to check everyone's safety and wellbeing. We saw identified issues were addressed to improve care delivery, such as enhanced staff training.

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

- ☐ The registered manager had extensive systems to monitor staff development and involve them in service improvement. For example, each employee had regular spot checks and competency testing. People who used the service were actively involved in staff appraisals to assess skills and effectiveness and their experience of care.
- ☐ Staff we spoke with said the management team was supportive, approachable and listened to their comments. One staff member stated, "It's a good company as the managers have been very supportive of me. If I have any problems they address them straight away."
- ☐ People who used The Local Care Agency told us they felt included in service development. One person said, "They ring us to see if everything is ok and if I have any suggestions for improvements." The provider also regularly sought feedback from people and their relatives about the quality of care. We saw comments from the last survey were complimentary.

Continuous learning and improving care

- ☐ The provider and management team were keen to carry out a review of incidents and lessons learnt to

maintain good standards of care. Records we looked at confirmed they acted to address identified issues.

Working in partnership with others

- We found the provider worked with other organisations in the ongoing improvement of people's lives, including health and social care services. For example, they worked with Disability Confident Committed and a Work and Health Programme. Both these external organisations engaged with the service to help people, including those with a disability, back into work.