

Loyal Blue Care Ltd

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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

Loyal Blue Care Ltd is a domiciliary care service providing personal care to older people who live at home. At the time of our inspection there were 16 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.

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

People received a safe service from a small staff team who knew people well. Medicines were managed safely. Risk assessments and appropriate care plans had been developed to meet people's needs.

People received a caring service and felt supported and valued as individuals. People told us they were treated with respect, staff upheld their dignity and promoted their independence during care visits.

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 were involved in developing their care plans which were person centred. Changes were made as people's needs changed.

The service was well-led and staff felt supported. The provider also worked with other professionals and organisations to ensure positive outcomes were achieved for people.

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

Rating at last inspection

This service was registered with us on 28 October 2021 and this is 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 ●

Loyal Blue Care Ltd

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 1 inspector.

Service and service type

This service is a domiciliary care agency. It provides personal care to people living in their own houses and flats and specialist housing.

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 a short period notice of the inspection. This was because it is a small service and we needed to be sure that the registered manager would be in the office to support the inspection.

Inspection activity started on 17 January 2023 and ended on 25 January 2023. We visited the location's office on 24 January 2023.

What we did before the inspection

We reviewed information we had received about the service. We sought feedback from the local authority

and 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 visited and spoke with 4 people who used the service and 1 family member about their experience of the care provided.

We spoke with 5 members of staff including the registered manager; who was also the nominated individual, senior carers and carers. The nominated individual is responsible for supervising the management of the service on behalf of the provider.

We reviewed a range of records. This included 5 people's care records and multiple medication records. We looked at 4 staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including policies and procedures were reviewed.

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.

Systems and processes to safeguard people from the risk of abuse; Learning lessons when things go wrong

- Systems were in place to protect people from the risk of abuse. Staff received training and understood the actions they must take if they felt someone was being harmed or abused.
- Staff also understood how to respond to, record and report incidents and accidents safely and told us they were confident any concerns would be treated seriously by the registered manager.
- Accidents and incidents were appropriately reported to external agencies. Records were reviewed on a regular basis by the management team to identify any lessons learnt.

Assessing risk, safety monitoring and management

- People's needs were appropriately assessed; care plans had been developed to minimise any risk to people's health and wellbeing.
- Staff told us the care plans were easy to follow and assisted them to provide safe care.

Staffing and recruitment

- There were enough staff to meet people's needs. People told us they received a reliable service and received support from regular carers. Comments included, "I have the same carers. If a stranger, they would be sent off," "The staff are very good and I know who is coming each day" and, "[Staff] are on time."
- We reviewed the rostering system and discussed how calls were monitored with the registered manager. We found there were clear systems in place to manage this.
- Recruitment procedures were safe. Checks were carried out on all staff before they started employment.

Using medicines safely

- Medicines were managed safely. People received their medicines as prescribed. Detailed and accurate records were maintained.
- Medicines were only administered by staff who had the correct training to do so. Regular checks on the competency of staff to administer medicines were undertaken.
- People were able to describe the support they needed to take their medicines; and told us they were happy with the support. One person told us, "Staff are aware of my medicines. they help to sort my prescription."

Preventing and controlling infection

- Systems were in place to protect people from the risk of infections. Staff had completed training and had access to adequate supplies of PPE.

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

- People's needs were assessed before they received a service. This information was used to develop risk assessments and care plans which reflected best practice and professional guidance.
- People confirmed they were involved in developing their care plans during initial visits from the provider. One person told us, "[The registered manager] came along with [a senior carer] to meet me and we chatted about my care."

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.

- The service was working within the principles of the MCA. Capacity had been assessed; legal arrangements such as power of attorney was clearly documented in care plans.

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

- Staff were aware of people's nutritional needs and had clear information within care plans with regards to this.
- People confirmed they were supported with their dietary needs and were provided with the assistance they needed to prepare meals as well as to eat and drink.

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

- The registered manager and care staff worked with other agencies to ensure people received consistent, effective and timely care. Care plans reflected professional input and advice.
- People confirmed they were supported to access their GP and other health services if this was needed.

Staff support: induction, training, skills and experience

- Staff received an induction when they started employment and completed the training they needed to support people effectively.
- Staff received ongoing support through regular supervision and observations of their practice.

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; Respecting and promoting people's privacy, dignity and independence

- People spoke positively about the care they received. They told us they were well-treated and supported; and staff respected their privacy and dignity. Comments included, "Excellent. Good girls. They would do anything for you" and, "[Staff] are just like family. Make you feel better."
- People also told us they were supported to be as independent as possible when receiving care. We were told, "[Staff] talk to you as a person. I am not rushed. I like to manage as much as I can. I don't like to let go" and, "[Staff] will ask 'can I manage?' but they don't take over."
- Staff spoke about people who used the service with fondness. They knew people well and how they liked to be supported.
- Care plans identified peoples' protected characteristics under the Equality Act 2010.

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

- Care plans and reviews demonstrated how people were involved in making decisions about their care.
- People confirmed they had been involved in developing and reviewing their care plans. they also told us they could make changes when they wanted to. One person said, "I can call [the registered manager] with any changes."

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; Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities that are socially and culturally relevant to them

- People received personalised care which reflected their needs and preferences. Care plans were person-centred. People who used the service told us, "The carers know me well. They make sure I am doing what I should be doing" and, "Everyone knows what to do and staff know what they are doing."
- People's social and cultural interests were considered when developing care plans. This was reflected through the timings of care calls which had been agreed to suit peoples' preferred lifestyles.

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 communication needs of people were assessed and reflected within care plans.
- Information about the service was available in different formats so people had access to information in a format they could understand.

Improving care quality in response to complaints or concerns

- There was a system in place for recording and responding to complaints. This was made available to people through the service user guide.
- People confirmed they knew how to raise concerns and felt confident any issues would be addressed. One person told us, "I have never been in the position to complain but I would speak to [the registered manager]. [They] sort things out."

End of life care and support

- At the time of the inspection, nobody was being care for at the end of their life. However, training for staff was available and, where appropriate, care plans contained information about people's wishes and feelings in respect of this aspect of their care.
- The service worked alongside other agencies to ensure people's needs were met at this stage of their life.

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; Continuous learning and improving care; 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

- There was a framework of governance underpinning the service. Audits and other checks completed by the management team were effective in identifying and driving improvements.
- The registered manager was open to any feedback received during the inspection and demonstrated a commitment to acting upon this in a prompt and effective manner.
- The registered manager understood their responsibility for notifying the Care Quality Commission of events that occurred within the service. This included responsibilities under the duty of candour. Accurate records were maintained.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

- People told us that the service was well-led and effectively managed. One person said, "I couldn't wish for a better agency. They treat me well, are very kind and are very gentle."
- Staff also felt supported, enjoyed their job and spoke positively about the registered manager and about working for the provider. One staff member said, "My colleagues are more like family. We know each other very well."

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Working in partnership with others

- People could influence how the service was delivered and were encouraged to offer feedback through questionnaires and regular contact with the management team.
- Staff told us they felt valued, were able to share their views and told us they were listened to. One staff member said, "[The registered manager] is brilliant. I can't speak more highly of all the managers. I wouldn't want to work anywhere else."
- The registered manager and the staff team worked closely with other agencies and professionals to ensure good outcomes were achieved for people.