

Laura Care Agency Limited

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Inspection report

47 Vyse Street
Hockley
Birmingham
B18 6HF

Tel: 01214599393

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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

Laura Care is a domiciliary care service providing a service to people living in their own home. This announced inspection took place on 17 December 2018 and 02 January 2019. We gave the provider 48 hours' notice that we would be visiting the service because we wanted to make sure staff and people would be available for us to speak with. At the time of the inspection there were 12 people using the service.

At our last inspection on the 30 June 2017 we rated the service as requires improvement in safe and well led. At this inspection we found that the required improvements had been made. There was a registered manager in post at the time of our inspection. 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.

Staff had been trained in safeguarding people. There were procedures in place to follow in an emergency. Staff knew what action to take if they identified any safety concerns during their work. General risks to individuals when providing support were identified so staff had the information they needed to support people safely. Staff and records confirmed that there were enough staff to meet people's care needs. Care staff had completed training to enable them to support people with their medication if required.

People benefitted from continuity of staff so relationships were built and people did not have to endure different staff for their care. Staff had received ongoing training to ensure that their skills were updated with current knowledge. The service followed a recruitment process which ensured staff were recruited safely.

Staff were caring and treated people with dignity and respect. People's choices and independence was respected and promoted and staff responded with kindness, maintaining people's dignity. People's care needs were regularly reviewed to ensure the care provided was up-to-date. Staff had an awareness of the Mental Capacity Act and the principles of the Act.

People and relatives felt they could speak with the registered manager about their worries or concerns and felt they would be listened to and action would be taken. The provider had quality assurance and audit systems in place to monitor the care and support people received to ensure the service met people's needs.

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 were protected from the risk of harm and abuse because the provider had effective systems in place and staff were aware of the processes they needed to follow.

Risks to people were appropriately assessed. People were supported by adequate numbers of staff so that their needs would be met.

People were kept safe as staff knew how to support them in cases of an emergency.

Is the service effective?

Good ●

The service was effective.

People's needs were being met because staff had effective skills and knowledge to meet those needs.

People's consent was obtained before care and support was provided by staff.

People were supported to eat healthily. People were involved in deciding how they received their care and support.

Is the service caring?

Good ●

The service was caring.

People were treated with dignity and respect and their privacy was upheld.

People's view and opinions were listened to.

People were supported to maintain their independence.

Is the service responsive?

Good ●

The service was responsive.
People were supported to make decisions about their lives and discuss things that were important to them.

People's likes and dislikes, routines and support needs were used to ensure people received a responsive service.

People knew who they could raise any complaints with and felt confident the registered manager would address their concerns.

Is the service well-led?

The service was well led.

Systems to support the registered manager to assess, monitor and review the service provided were in place that were reviewed regularly to ensure the service provided met people needs.

Relatives and people knew the registered manager and had a positive relationship.

Staff were happy working for the provider and felt valued.
Regular monitoring of the service provided resulted people being happy with their care.

Good ●

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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 was planned to check 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 commenced on 17 December 2018 and was completed on 02 January 2019. We gave the service 48 hours' notice of the inspection visit because the location provides a domiciliary care service. We needed to be sure that they would be in. When planning our inspection, we looked at the information we held about the service. This included notifications received from the provider about deaths, accidents/incidents and safeguarding alerts which they are required to send us by law.

The service provides support for 12 people, during our inspection we spoke with 10 of the people using the service, three relatives, four staff and the registered manager who was also the provider. We reviewed the care records of three people to see how their care was planned and delivered. We looked at recruitment, training and supervision records for three staff. We also looked at records which supported the registered manager to monitor the quality and management of the service.

Is the service safe?

Our findings

At the last inspection we rated the service as requires improvements under the key question is the service safe. At this inspection we saw that improvements had been made to rate this key question as good. People and relatives told us that they felt the service provided was good and they all said that the staff made them feel safe. One person we spoke with said, "They're [staff] very good, they come out to see me twice a day. I feel very safe with my carers [staff]". A relative we spoke with told us, "We're [family] very happy with the care mom's getting". Another relative told us, "She's [person using the service] certainly safe with the staff, they look after her very well, I'm not worried at all". The registered manager had systems in place to monitor the service provided, for example, assessing and reviewing risk assessments, completing spot checks to assess a staff member's performance and speaking with the person using the service.

Staff spoken with understood how to recognise signs of abuse and told us they would report concerns to the management team straight away. The registered manager understood their responsibility for reporting any safeguarding concerns to the local authority safeguarding team and to us. People were supported by staff who were safe and suitable to work with them. The recruitment processes included safety checks such as Disclosure and Barring Service (DBS) checks to confirm their suitability.

The registered manager told us there was enough staff to meet people's needs safely, and staff confirmed there was no concerns in covering the calls they had. Records looked at told us, that there were sufficient numbers of staff to ensure people had their calls on time. All people spoken with confirmed there had been no missed calls. The registered manager told us there was an out of hour's on-call system to support staff when the office was closed. Staff said there was always someone available if they had any concerns or worries.

We saw that the provider carried out regular risk assessments which involved the person, their family and staff. We saw that risk assessments were updated regularly. Any changes that were required to maintain a person's safety were discussed and recorded to ensure that potential risks were minimised. Staff could explain what action they should take in the event of an emergency and there were clear procedures in place that staff could follow to ensure people's safety. We saw the provider had an accident and incident policy in place to support staff and safeguard people in the event of an emergency.

People spoken with told us that there was good communication between them and the office. Staff had received training in infection control and procedures were in place to prevent cross infection, for example the use of protective equipment. Some people spoken with told us staff supported them with their medication and this was administered as prescribed. One person told us, staff make sure I take my medicine, which keeps me, well they are all very good staff." All staff told us that they had received training in medication so people were supported with their medicines safely.

Is the service effective?

Our findings

People spoken with felt that staff had been trained. One person told us, "They [staff] are all very skilled I think, they certainly know what they are doing as far as I am concerned." Another person told us, "I am not sure what training they have but they are very competent, and I could not ask for better treatment." One relative told us, "I feel staff are trained, and they demonstrate this in the way they look after mom".

Staff we spoke with told us that they felt they were provided with the appropriate training to support people. Staff told us training was discussed in supervision which they had monthly. A relative we spoke with said, "I think they're [staff] all trained well enough, I'm no expert on the training they receive, but they know enough to look after (person using the service) properly."

Records showed staff were trained in accordance with the Care Certificate which offers guidance on the basic skills and knowledge needed to work with people requiring health and social care support. We saw that the registered manager maintained training records for each member of staff ensuring that they were appropriately skilled to perform their duties. Records demonstrated and people using the service confirmed, the allocation of staff was matched to peoples' care needs. People's diverse needs were taken into consideration as part of their care needs. Care plans and risk assessments provided the necessary information to enable staff to offer people the right amount of help to eat and drink and meet their daily care needs.

The Mental Capacity Act 2005 (MCA) provides a legal framework for making 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 people lack mental capacity to take decisions, any made on their behalf must be in their best interests and as least restrictive as possible. At the time of this inspection, the people currently using the service had the mental capacity to make their own decisions and consent to their care. Staff spoken with were aware of the MCA and the principals. Staff told us if they had any concerns about a person's capacity to make decisions they would inform the registered manager.

People we spoke with were happy with how they were supported at meal times. One person we spoke with told us, "They [staff] are very good with my meals, I've got plenty to eat and they do it well. I've always got a drink here too". A relative we spoke with told us, "[Staff member's name] supports her [person using the service] with her meals and makes sure she's eating well". People told us that their relatives supported them to attend medical appointments.

Is the service caring?

Our findings

All the people spoken with told us they were pleased with the care and support provided. A person we spoke with told us, "The carers [staff] are nice and kind, I like them". A relative said, "Mom's happy with them [staff], they're kind and I know she's okay".

All the people we spoke with told us they were supported by staff who were respectful and met their care needs. People also confirmed that staff respected their wishes, consulted with them and maintained their dignity and preferences as people wanted. One person told us, "I am a bit shy but the staff make me feel as if I am in control, they respect my dignity by making sure I am covered when they help me with a shower". Relatives we spoke with were pleased with the staff that supported their family members. One relative told us, "I feel that mom is well looked after as a person not a number".

People who use the service told us staff were always on time, very helpful and they had continuity of care because they had the same staff. One person told us, "I have the same one [staff] we have a good relationship she knows me well, down to the little bits I like having done". Another person told us, "I am very happy with the care I get, they make sure I am okay and I can stay at home which to me is very important and I put this down to them looking after me". A relative told us, "[person name] is very happy with the agency, and the management is approachable if we have any issues".

People's diverse physical, emotional and spiritual needs were met by staff who were provided with appropriate, detailed information to enable them to meet people's identified needs. Staff took time to ensure people were provided with care that supported and encouraged them to regain and maintain their independence as much as possible.

The registered manager told us were possible they employed staff from different cultural backgrounds, and male staff so people had a preference. The registered manager told us there was enough staff to allocate all the calls using a system so people's choices can be met regarding the gender of staff who provide care.

Is the service responsive?

Our findings

People using the service and relatives told us they felt that the provider was responsive to people's needs. A person we spoke with told us, "I can call [manager's name] anytime, staff make sure I am alright ". One relative gave an example of how staff were flexible in their approach. "We're pretty flexible about visit times and it works well for us, and the agency fit in around our needs". A staff member we spoke with told us, "People like doing things differently, each person is an individual which means they are cared for differently, we always ask the person what they want, people's choice".

All the people we spoke with told us that care staff always asked what they wanted to do and were respectful in their home. People told us staff encouraged them to be as independent as possible.

People told us they felt listened to and they could speak with the care or office staff, or the registered manager if they wanted things changed. All people told us they would contact the office if they had any concerns or talk to their carer. One person told us, "I had a little niggle, I told staff and it was sorted the same day they are very good".

Relatives, staff and people using the service felt confident that the registered manager would do their best to try and sort any concerns out if any were raised. All people using the service were aware of the complaints procedure

The support people received was personal to their needs, preferences, likes and dislikes. This helped staff to ensure the care provided was personal to the individual. Reviews took place to ensure when people's needs changed the changes were captured so amendments to the care provided could be implemented. One person told us "They [provider] do review my care and change things if needed". Where people had specific health care needs these were clearly identified and showed how people should be supported. The registered manager and staff were knowledgeable about equality and diversity as staff training covered these principles.

The registered manager had systems in place for people and relatives to provide feedback about the care and support being provided. People and relatives told us that they had regular contact with the staff, manager and office. We looked at some of the feedback that had been sent to the agency. There were a number of compliments about the service provided and the staff for example, one compliment said, "I feel I must commend your agency for having some of the finest and dedicated care staff I have come across."

Is the service well-led?

Our findings

At the last inspection we rated the service as requires improvements under the key question is the service well led. At this inspection we saw that improvements had been made to rate this key question as good.

All the people using the service and their relatives were complementary about the care provided by the staff that supported them. People spoken with during our inspection felt they received a good service. We saw that surveys were sent to people using the service for their views about the service provided. A staff member told us that the registered manager completed spot checks to ensure people's need were being met. We looked at the last survey completed in 2018 all the people who completed the survey was positive about the service provided and the care they had. Staff told us they felt supported and valued by the manager. All staff spoken with told us they felt supported and they could speak with the registered manager at any time for advice.

There was a registered manager in place. 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. ' Staff and the manager were clear about their roles and responsibilities. A staff member told us "I like working for them [provider], they're a good company and everybody gets on well". Another staff member told us, "It is a pleasure to look after the people I support."

We saw that quality assurance systems were in place for monitoring the service provided. People and relatives were encouraged to share their experiences and views of the service provided. We saw evidence that regular audits were taking place, for example; individual care plans, risk assessments, reviews and feedback from people about the care they received. Everyone we spoke with thought the agency was well managed. People felt actively involved in the planning and reviewing of their care and they felt in charge of the support provided to them. All the people spoken with would recommend the agency to other people. One person told us "I would happily recommend it to anyone else."

The registered manager understood the responsibilities of their registration with us and we had received appropriate notifications about incidents and accidents they are required to tell us by law. Duty of Candour is a requirement of the Health and Social Care Act 2008 (regulated activities) Regulations 2014 that requires registered persons to act in an open and transparent way with people in relation to the care and treatment they received. We found the registered manager had been open in their approach with us during the inspection. People, relatives and staff spoken with confirmed they had found the registered manager to be approachable and listened to their view. A relative told us, "The manager listens, I asked her to do something and it was done almost immediately it made such a difference for my relative."