

Luna Care Services Ltd

# Luna Care Services

## 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

Luna Care Services is a domiciliary care service providing personal care to people living in their own homes. It provides a service primarily to older adults, some of whom are living with dementia. At the time of the inspection 11 people were being supported by 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

There were well developed effective systems and processes in place to help ensure that people were kept safe.

Risks were assessed and where any risks were identified, measures put in place to mitigate them. Effective infection prevention and control (IPC) systems were in place which helped keep people safe. Staff were well trained and competent in their roles.

There were enough staff to support people at their preferred times. The registered manager always considered capacity before taking on a new care package. The staff knew people well and effectively met their needs. Staff received regular training that supported them in their role.

The service operated an open and transparent culture which was inclusive. The management team and staff had open conversations and shared learning and experiences in a 'safe space'.

People had 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 treated as individuals and people were supported in a non-discriminatory way. The service was person-centred and staff respected people's privacy and dignity. People told us the staff were always respectful and helped them to remain as independent as possible.

No concerns had been received. Staff and the management team continually monitored the quality of the service. This meant they were able to tweak any concerns before it became a complaint. The service had received numerous compliments and testimonials regarding the excellent standard of care people received.

The registered manager understood their regulatory responsibilities. Staff were supported in their role to be open and honest by promoting the provider's values. People were asked for feedback on a regular basis and had a say in how the service was run and managed.

There were robust quality assurance systems in place which were used to consistently drive improvements and maintain good quality care. The management team worked in partnership with other professionals so people received holistic care.

#### Rating at last inspection

This service was registered with us on 07 February 2020 and this is the first inspection.

#### Why we inspected

This was a planned inspection based on the date of registration with CQC.

For more details, please see the full report which is on the CQC website at [www.cqc.org.uk](http://www.cqc.org.uk)

#### Follow up

We will continue to monitor information we receive about the service until we return to visit as per our re-inspection programme. If we receive any concerning information we may inspect sooner.

## 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 ●

# Luna Care Services

## 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 Care Act 2014.

#### Inspection team

The inspection was undertaken by one inspector.

#### Service and service type

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

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 inspection was announced. We gave the registered manager 48 hours' notice of the inspection. This was because it is a small service and we needed to be sure that the provider/registered manager would be available to support the inspection.

Inspection activity started on 28 September 2021 and ended on 14 October 2021. We visited the office location on 01 October 2021.

#### What we did before inspection

We reviewed information we had about the service since it was registered. We requested feedback from external professionals who work with the service. The provider had completed a provider information return prior to this inspection. This is information we require providers to send us to give some key information about the service, what the service does well and improvements they plan to make. We took this information into account when we inspected the service and made the judgements in this report.

During the inspection-

We received feedback from two people who used the service and two relatives about their experience of the care and support they received. We spoke with the registered manager, deputy manager, and the newly appointed care manager. We received feedback from four external professionals who have experience and or knowledge of the service. We received feedback from five staff members. We reviewed a range of documents relating to various aspects of the service. This included two people's care records, various risk assessments and medication records. We spoke to staff about the recruitment process, support arrangements and training. We reviewed a variety of records relating to the overall management of the service, including surveys, quality assurance, staff rotas and the statement of purpose.

After the inspection

We reviewed information provided throughout the inspection process and sought clarification from the management team to validate evidence found.

# 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 for this newly registered service. This key question has been rated as Good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People who used the service told us they felt safe. One person told us, "The staff are well trained and knowledgeable. I have never had any concerns about my safety. A relative told us, "I feel reassured knowing the staff who look after my [relative] helps to keep them safe."
- Staff demonstrated they knew how to recognise and report any concerns in relation to potential abuse, harm or neglect.

Assessing risk, safety monitoring and management

- People were confident that they had been involved in discussions about potential risks, and how they might be mitigated. We saw evidence of a very robust risk management system. All different types of risks were assessed, and where possible, measures were put in place to mitigate them.

Staffing and recruitment

- People and relatives told us they were confident that the staff working for the service had been properly recruited. All required pre-employment checks had been completed including a disclosure and barring check [DBS] and references from previous employers were sought. There were sufficient staff to assist people at their preferred times.

Using medicines safely

- People felt safe being supported by staff to take their medication. One person who used the service told us, "The staff were very knowledgeable about their individual needs, times and [when] medication should be administered."
- Staff demonstrated a broad knowledge about the importance of following the medication policy. They had regular competency checks.

Preventing and controlling infection

- We were assured that staff were using personal protective equipment (PPE) effectively and safely. People told us that staff always arrived in (PPE). Staff also demonstrated they had received training and wore the correct PPE when supporting people.
- We were assured that the provider's infection prevention and control policy was up to date. The registered manager and staff were aware of the current infection control measures. Policies and procedures in relation to reducing the risk and spread of infection was regularly updated in accordance with government guidance.

Learning lessons when things go wrong

- The registered manager shared any learning when things went wrong to help prevent a reoccurrence. The team worked closely together and had regular information sharing team meetings where any learning from accidents or incident was shared.



# 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 the service commenced. This ensured they had staff with skills and experience to support the people in a way they preferred.
- Assessments recorded people's individual needs, preferences and any identified risks.
- People and relatives told us the service was well organised and staff were able to meet their needs in a professional manner.
- Regular contact was made with people to check that the service continued to meet their assessed needs.

Staff support: induction, training, skills and experience

- Staff completed an induction and had regular training as well as updates. Staff told us they were very well supported by the management team, and had regular support and supervision.

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

- People were supported to eat and drink if this was part of their assessed need.
- The registered manager told us about how they supported people with special dietary requirements. This included how weight loss, cultural preferences and referral to other professionals if any concerns were identified, were managed.

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

- The staff team worked effectively with other organisations. They had established and developed relationships with other professionals, such as GP's, district nurses.
- People and their relatives told us they only had to mention a healthcare concern to a staff member, and it was acted on. For example, staff promptly contacted GP's and chiropodists.

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 Act 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.

- People told us that staff obtained people's consent before supporting them. Staff obtained consent for all aspects of people's lives, including information sharing, accessing personal care records, and taking photographs.
- When required people had mental capacity assessments completed. Where a person had a nominated power of attorney, a copy of this was kept on record to ensure they had the appropriate authority to make decisions.
- Staff received training in relation to the principles of the Mental Capacity Act and knew how to apply this in their day to day work.

# 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 and their relatives told us that staff always treated them with kindness and respect. One person told us, "They are amazing the staff. Every one of them. I am always happy to see them." A relative told us, "I feel reassured knowing the staff from Luna care are looking after my [family member]. They are all lovely really caring and nothing is ever too much trouble."
- People were supported by a small team of staff who knew them well and were able to get to know about their individual likes and dislikes. People and relatives said staff communicated with them and made them feel comfortable.
- People's care and support plans were very detailed and specific. Information recorded meant that care staff were able to know in detail how a person liked to be supported. Staff described people in detail and spoke kindly and compassionately.
- Staff knew about people's preferences in relation to culture, ethnicity and spiritual beliefs and observations. Staff supported people to maintain their cultural and spiritual preferences.

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

- People and their relatives were extensively involved in decisions about their care and support. One person told us, "It's not a one off when they discuss your requirements. It is an ongoing process. They always check that you are happy and that the care provided is still meeting your needs." A relative told us, "They are happy to tweak the times or make any changes requested."

Respecting and promoting people's privacy, dignity and independence

- People and their relatives told us that staff promoted people's privacy, dignity and supported them to retain their independence.
- People told us that they felt so much better since being supported by Luna care. A person told us "I have had previous experience of care. Luna are like a breath of fresh air. I look forward to seeing them."
- People and their relatives told us how the staff were mindful of people's dignity, for example, when supporting people with personal care to ensure their privacy was maintained.

# 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 were consistently happy with the care they received. Family members also spoke very positively about the care their relatives received. A relative told us, "They are brilliant, everything is centred around [my family member], what they want, and how they want it done they really are brilliant."
- Care plans gave clear information to staff so they could support people as they wished. These plans and care notes were accessible through an electronic system that prompted staff to ensure all planned care was given. Relatives too could access information about their family member, within a secure setting which limited information that could be accessed.

Meeting people's communication needs

Since 2016 onwards all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard (AIS). The standard was introduced to make sure people are given information in a way they can understand. The standard applies to all people with a disability, impairment or sensory loss and in some circumstances to their carers.

- As part of the initial assessment of needs, people's individual communication needs were discussed, and measures put in place to support people with effective communication.
- If anyone had a visual impairment for example, records could be provided in large print, braille and or in different languages. As part of regular reviews communication was kept under regular review.

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 were supported by staff to remain living in their own homes. Staff supported people to retain independence and to retain and or regain skills in relation to everyday living tasks.
- Staff encouraged and supported people to continue to participate in hobbies that were of interest them. For example, people were supported to go shopping, go for a walks, get their hair done, see friends and enjoy a meaningful social life.

Improving care quality in response to complaints or concerns

- People and their relatives told us they had not had any complaints. They told us, they would speak to a staff member or a member of the management team if they had anything that needed attention.
- One person told us, "Luna Care never has complaints because they check that everything is going well. They are very proactive." A relative told us, "They are the best and know they have to maintain the excellent standards we are used to."
- There was a robust system in place to record and monitor complaints. The management team were all

positive about making continual improvements and told us they welcomed feedback as a means to improvement.

#### End of life care and support

- At the time of this inspection no one was receiving end of life support. However, staff had received training in end of life care This meant staff would be able to support people to continue to be cared for in their own home.
- Staff worked in partnership with many healthcare professionals and would be able to work together to ensure the person received appropriate end of life care.

# 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.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people; 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; Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements

- The registered manager had a wealth of experience of working in various care settings. It was clear they were passionate about providing consistently high-quality care. They have been nominated for a care award in the Outstanding leadership category.
- The registered manager and deputy manager understood their regulatory responsibilities and duty of candour. They demonstrated a wealth of knowledge and demonstrated a detailed knowledge to all aspects of the service. They created a culture that was open honest and transparent for example when things went wrong. They were aware of what they needed to report to CQC.
- Feedback was consistently positive from people, relatives, staff and professionals.
- We heard many examples about staff and the managers going the extra mile. They had assisted people in a variety of ways. For example, sourcing a specific medication for a person late at night; assisting people with weight management programmes; sourcing specialist equipment, to assist people with specific grooming procedures. This made people very happy and more independent. A relative told us "We simply could not have managed without them. They're a god send. Nothing is ever too much trouble."
- There were quality monitoring procedures in place for all aspects of the service. This included specially developed, COVID-19 quality assurance audits and personal protective equipment PPE. This ensured compliance with government requirements.

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

- People and relatives were continually asked to provide feedback through various forums. For example, feedback was sought through surveys and quality assurance calls or visits to people by the newly employed care manager. Feedback was reviewed so that any actions, suggestions or ideas could be developed.
- The registered manager and staff shared information from events and any learning was shared with the staff team as required.
- The registered manager developed good working relationships with many organisations and professionals to people received holistic care for people which was seamless and joined up.