

Lincoln House Care Home Ltd

Woodgate Park

Inspection report

43 Jasmine Walk
Swanton Morley
Dereham
NR20 4FN

Tel: 01362637555

Date of inspection visit:
14 June 2023
13 July 2023

Date of publication:
25 July 2023

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

Woodgate Park is a domiciliary care agency providing personal care to people living in their own homes within a retirement village complex.

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 medicines. Where they do, we also consider any wider social care provided. There were two people being provided with personal care at the time of our inspection.

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

Risks associated with people's care were managed safely and systems were in place for learning lessons when things go wrong. People's medicines were well managed. We have made a recommendation that the provider reviews their medication procedures to ensure records reflect best practice guidance.

People told us there were sufficient staff to deliver their care according to their preferences and that and they knew the staff who cared for them well. The service had systems in place to safeguard people from abuse and harm.

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.

Feedback about the standard of care and leadership of the service was consistently positive. Staff felt valued and were proud to work at Woodgate Park.

Records demonstrated people's care was planned and reviewed. The service worked effectively with other professionals, where required, to support people's needs.

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

Rating at last inspection and update

This service was registered with us on 24 June 2020, and this is the first inspection.

Why we inspected

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

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.

Woodgate Park

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 undertaken by one 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.

Service and service type

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

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 the service 48 hours' notice of the inspection. This was because it is a small service and we needed to be sure that the provider or registered manager would be in the office to support the inspection.

Inspection activity started on 14 June 2023 and ended on 13 July 2023. We visited the location's office/service on 14 June 2023.

What we did before the inspection

e sought feedback from the local authority and healthcare professionals who work with the service. The provider was not asked to complete a Provider Information Return (PIR) prior to this inspection. A PIR is information providers send us to give some key information about the service, what the service does well and improvements they plan to make. We used all this information to plan our inspection.

During the inspection

We spoke with both people who used the service about their experiences of receiving care and support from Woodgate Park. We spoke with 2 relatives and received written feedback from received written feedback from a further 5 staff members. During our visit to the office, we spoke with the registered manager, the support co-ordinator and the regional manager.

We reviewed both people's care records. We looked at staff files in relation to recruitment practices. We reviewed various records relating to the management of the service, including training records and quality assurance audits.

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

- People were protected from the risk of abuse. The provider's safeguarding policy and processes were established, and staff had received training and knew what action they should take if they had any safeguarding concerns.
- People told us that they felt safe with the care they received from staff at Woodgate Park. One person told us, "Yes, I feel safe. I can't praise them [care staff] enough." Another person's relative said, "I am very happy and feel [family member] is safe. I am grateful."

Assessing risk, safety monitoring and management

- Risks to people were regularly assessed and monitored. Lessons were learned when things went wrong. Detailed risk assessments and care plans were in place, so staff knew how to support people.
- We looked at both people's care plans and both contained a range of risk assessments. Each assessment described how best to manage the risk and the steps staff needed to take in the event of person needing support.
- People received care and support at the times they requested and had been assessed for. Due to staff being available 24 hours a day, care and support was also flexible and responsive.

Staffing and recruitment

- There were enough safely recruited staff to support people and deliver their care.
- People were supported by a small stable staff team. People were positive about the care and support they received. This included receiving care at consistent times and when requested. Staff stayed for the duration of the call and were unrushed. One person told us, "My care is at a very convenient time for me. They have excellent time keeping and have never missed a call." Another person told us, "Sometimes they even stay longer than allocated time." Another person's relative said, "They are always very good, always on time. I know if they were late, they would let us know."
- Staff told us that there were enough staff to meet the needs of people.
- New staff were recruited safely, and pre-employment checks were in place, which included verification of identity, references from previous employers and the Disclosure and Barring Service (DBS) check. DBS checks provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.

Using medicines safely

- People mostly managed their own medicines and at this inspection we found care staff were only

supporting people with topical medicines.

- Staff received relevant training before they were able to support people with their medicines and the manager checked staff competency to do so.
- The provider had implemented a form for staff to complete when supporting people with their topical medicines. We discussed with the registered manager about ensuring the information on the forms was clear and detailed to ensure consistency.

Preventing and controlling infection

- We were assured that the provider was supporting people to minimise the spread of infection.
- We were assured that the provider was using PPE effectively and safely.
- We were assured that the provider was responding effectively to risks and signs of infection.
- We were assured that the provider was making sure infection outbreaks can be effectively prevented or managed.
- We were assured that the provider's infection prevention and control policy was up to date.

Learning lessons when things go wrong

- The provider had a process in place for reporting accidents and incidents and analysed the data from these.
- The provider reviewed lessons learnt when things went wrong and took action to reduce the risk of a reoccurrence.

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

- Detailed assessments of people's needs had been completed. This information included people's physical and mental health needs.
- The provider's assessments were comprehensive, reflected best practice guidance and considered all aspects of people's needs. They included specific assessments for skin integrity, nutrition and mobility.

Staff support: induction, training, skills and experience

- People and their relatives were confident they were supported by staff who knew how to care for them. One person's relative told us, "Lots of them [care staff] have worked in care homes and have the experience. The staff have mentioned that during training they have been in the sling and hoisted to see what it's like."
- The registered manager met regularly with staff to review their performance and development needs. Staff felt supported and able to discuss any concerns, share ideas and request further training.
- The provider's training records showed a wide range of training was completed across relevant areas.

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

- People were supported to live healthier lives through access to health care professionals such as their GP's and district nurses,
- People and their relatives told us they were able to access healthcare professionals when they needed to.

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.

- People told us staff gained their consent before supporting them with their care and support. One person

told us, "They [care staff] always ask what I want. For example, this morning I didn't want my legs touched so they just washed my body for me."

- The management team and staff had a good understanding of their responsibilities which made sure people were supported in line with the MCA.
- At this inspection no applications had been submitted to deprive someone of their liberty. Some people had lasting power of attorney registered to ensure they had someone to act on their behalf should their health deteriorate, a copy of this was held in their care records.

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 told us staff were kind, caring and treated them respectfully. One person's relative said, "The care staff have got to know [family member]. They chat and laugh, it's more like a friend coming round." Another person said, "The staff are lovely, I get on well with them. We have a laugh and a joke; they are very caring."
- Staff were knowledgeable about the people they were supporting. They knew people's likes and dislikes and knew how to support people the way they wanted to be supported. One person's relative said, 'The care staff are all friendly and kind. They put [family member] at ease.'
- Staff delivered care to people with consideration and kindness, and they fondly described their job roles delivering care.
- The management team promoted good standards of care, with the support of the staff team, to ensure people were consistently well treated and supported. This including respecting and promoting people's equality and diversity needs.

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

- People's care plans were developed with them and their relatives where appropriate. People's likes and dislikes were documented and included in their care plans, for example, what time they liked to go to bed or get up and where they liked to eat their meals. A relative told us, "We are very involved as a family. [Care staff] regularly take the folder away and check its kept updated."
- Communication needs were documented so people could be supported in the best way to be involved in decisions about their care.

Respecting and promoting people's privacy, dignity and independence

- People were treated with dignity and respect; their privacy was protected, and they were encouraged to be independent where possible. One person's relative told us, "I have no concerns, none at all. The care staff are very discreet. The curtains and blinds are always closed when they are assisting with care. They support [family member] with care and compassion."
- Staff recognised and responded to individual needs and promoted independence. Care plans detailed what people could do for themselves and what they might need support with and included information about equipment used to support independence.

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

- There was a positive, inclusive, and empowering culture in the service.
- The approach to care was person centred. Care plans were informative and evidenced that people had been fully involved in developing their care plans and how they wanted to be supported. One person commented, "I chose the Care Plan and discussed what I wanted. I am getting what I want." Another person told us, "I am getting the care I need to be able to stay at home." Another person's relative said, "The manager came and discussed the whole set up and put a plan together. We had a look at it and then we could make any amendments. We are very satisfied."

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.

- Care plans included detailed information about people's communication needs. Staff engaged with people in a way that demonstrated they understood their individual non-verbal and verbal communication.

Improving care quality in response to complaints or concerns

- People told us they were listened to, and concerns were taken seriously and acted upon.
- People and their relatives knew how to raise any concerns or complaints. One person told us, "If I had a concern I would speak to the manager. [Manager] is in charge and I have got to know them for a long while. They have been very good to me." Another person's relative said, "If I had a concern I would speak to the manager, but they are all very approachable."

End of life care and support

- At the time of the inspection, nobody was being cared for at the end of their life. Where appropriate, care plans contained information about people's wishes and feelings in respect of this aspect of their 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

- People received personalised care and support. Care staff were well trained and supported to provide effective care.
- People and their relatives were highly complementary and told us, without exception, that they would recommend the service to others. One person said, 'I would absolutely recommend the service. I am very observant, and I give them top marks.' Another person's relative told us, 'It's a very nice, maintained site to live in. [Family member] has their own independence but help available and support [when they need it].'
- Staff were also highly positive about their experiences of working at Woodgate Park. One staff member told us, 'The management at Woodgate Park are great and I feel that if I raised any concerns, they would be supportive and address the situation. Staff morale is high, we work as a team, and I feel very lucky and happy to be part of Woodgate Park.'

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 provider had a duty of candour policy in place and understood their responsibilities to support an open, honest, and transparent culture.
- The registered manager understood their responsibilities under the duty of candour which requires services to act in an open and transparent way if accidents or incidents occurred.

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

- The management team promoted high quality care and led by example. Everyone we received feedback from had confidence in the management team and told us the service was well-led. One person said, 'The service is very well managed. The [registered] manager listens. They support my [spouse] as well, it's so beneficial to us.' Another person told us, 'I think it is well managed. These last few weeks, during holiday time, [registered manager] has managed to cover all the shifts. [Registered manager] even stepped in and helped themselves.'
- Systems and processes for monitoring quality and safety were effective. The provider had audit and checks in place to monitor the quality and safety of the service.
- The regional manager was in frequent contact and kept up to date with what was happening in the service and monitored the quality of service delivered.
- Care records were well organised and showed people's care was planned and reviewed.

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

- Relatives confirmed they and their family members felt involved and consulted about the care provided. One relative said, "The care has put [family member] at ease. [Family member] was worried about having carers, but they have made [family member] less anxious during a stressful time."
- The provider had systems and processes in place to gain feedback from people about the care they received.
- The service worked effectively alongside other health and social care professionals who were involved in people's care as required.