

Linmar Care Ltd

Linmar Care Ltd

Inspection report

62 Oakwood Avenue
West Mersea
Colchester
CO5 8AX

Tel: 01376802011
Website: www.linmarcare.co.uk

Date of inspection visit:
15 May 2019
20 May 2019
21 May 2019

Date of publication:
18 June 2019

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:

Linmar Care is a domiciliary care agency. It provides personal care to people living in their own homes. The agency supports 13 people. Some of the people using the service had differing needs and the frequency of visits depended on people's individual requirements. Some elements of the service, although provided by Linmar Care, would not need to be registered with the Care Quality Commission (CQC) if this was their sole purpose. Because of this, we have focussed our inspection on the people in receipt of personal care only. At the time of our inspection, only nine people were receiving personal care.

People's experience of using this service

People were very positive about the support provided to them. Without exception, people said they felt safe and staff were respectful.

People received their medicines safely and their health was well managed. Staff had developed links with healthcare professionals which promoted people's wellbeing.

People said they received good care from friendly staff who went out of their way to assist them. Relatives said the service was reliable and efficient. They had good communication with the office and were given information about which staff would be making their visits each week.

Staff had received appropriate induction, training and support to enable them to carry out their role.

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

The registered manager worked with the staff team and led by example to ensure people received a good service. Care was delivered in a personalised way which was in line with information recorded in people's care plans.

People and family members knew how to make a complaint and they were able to raise concerns should they need to. They were confident that their complaint would be listened to and acted upon quickly. People, relatives and staff told us the management team were approachable and listened to them when they had any concerns. All feedback was used to make continuous improvements to the service.

Rating at last inspection: This service was registered with us on 25 May 2018 and this is the first inspection.

Why we inspected: This was a scheduled inspection based on the previous rating.

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

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

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 ●

Linmar 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 as part of our regulatory functions. This inspection checked 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.

Inspection team

This inspection was carried out by one inspector

Service and service type

Linmar Care is a domiciliary care agency. It provides personal care to people living in their own houses, flats and specialist housing. It provides a service to people in the Mersea, Colchester and surrounding areas. At the time of our inspection the service was supporting nine people and employed 7 members of staff.

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 service 48 hours' notice of the inspection visit because we needed to be sure that someone was available at the office. Inspection site activity took place on 15 May 2019 and telephone calls to people using the service, staff and relatives were made on additional days. We visited the office site location to see the registered manager and office staff and to review care records and policies and procedures.

What we did when preparing for and carrying out this inspection:

Before the inspection, we reviewed information we had received about the service since the last inspection. This included details about incidents the provider must notify us about and we sought feedback from the local authority and professionals who work with the service. We used information the provider sent us in the Provider Information Return. This is information we require providers to send us at least annually 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 three people and two relatives of people who use the service to ask about their experience of the care provided. We spoke with four members of staff which included the registered manager, finance director and care staff.

We also reviewed a range of records. These included three people's care and medicine records. We looked at three staff files including supervision records, records relating to the management of the service and a variety of policies and procedures developed and implemented by the provider. We looked at records relating to recruitment, training and systems for monitoring quality.

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

- Policies in relation to safeguarding and whistleblowing reflected local procedures and relevant contact information.
- Staff demonstrated a good awareness of safeguarding procedures and knew who to inform if they witnessed or had an allegation of abuse reported to them.
- The registered manager was aware of their responsibility to liaise with the local authority if safeguarding concerns were raised.

Assessing risk, safety monitoring and management

- Systems were in place to identify and reduce the risks to people who used the service. People's care plans included risk assessments. These provided staff with a clear description of any risks and guidance on the support people needed. Staff promoted people's independence and freedom and were aware of the need to minimise the risks.
- Accidents and incidents were recorded and responded to appropriately. The registered manager had oversight of these and monitored them for any trends or patterns. They recorded where lessons were learnt.
- People said they felt safe, confident and happy when being supported by staff. One person said, "I generally have regular staff who are lovely, and we feel very safe with them."

Staffing and recruitment

- People and their relatives told us they received care in a timely way. They were usually notified if calls were going to be late. One person said, "I can't remember a time when they have ever been late." The registered manager told us they advised their care staff well in advance of their individual rotas and this ensured there were effective and efficient visit plans for staff.
- People confirmed they had a core team of staff who supported them but had different care staff on a regular basis. One person told us, "They are all great and know what you require. They are all very good and know what they are doing." Discussion with people indicated there was no adverse impact on them from having different care staff.
- Staff were recruited safely. Appropriate checks were carried out to protect people from the employment of unsuitable staff.

Using medicines safely

- Medicines were safely received, stored, administered and destroyed when they were no longer required, and people were encouraged to manage their own medicines where they had those skills.
- Staff received medicine management training and competency checks were carried out regularly.
- People told us they were happy with the support they received to take their medicines.
- Records showed that medicines were administered as prescribed.

Preventing and controlling infection

- Processes were in place for the prevention and control of infection. All staff had completed infection control training. Unannounced spot check visits were completed by the registered manager to ensure staff followed the infection control procedures and used personal protective equipment when carrying out personal care, food preparation and handling.
- Staff were aware of the precautions necessary to prevent the spread of infection to others.

Learning lessons when things go wrong

- Staff reported accidents and incidents and told us they received feedback on things to do differently to prevent similar issues occurring in the future.
- Records confirmed that when something had gone wrong the registered manager responded appropriately and used such incidents as a learning opportunity.
- The registered manager advised that they were in the process of completing audits of incidents and accidents to ensure continued learning.

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

- Assessments of people's needs were completed, and care and support regularly reviewed.
- Staff followed best practice guidance, which led to good outcomes for people and supported a good quality of life.

Staff support: induction, training, skills and experience

- A robust staff induction and training programme was in place.
- Staff had opportunity for supervision and appraisal. The registered manager had good systems to understand which staff required training to be refreshed and who required supervision. Staff told us they felt supported. One staff member told us, "The training does equip me for my role yes, and we recently did dementia training, I found that a real eye opener, but all training increases your knowledge. I think the training I have had has really helped me develop."
- People told us staff had the right skills to look after them. One relative said, "The care we receive is excellent. The staff we have are really on the ball."
- Records confirmed all staff had regular one to one supervision meetings to review their performance, identify any further training and support needs and to check staff's understanding of their roles and responsibilities.
- The staff training records confirmed they received induction training and on-going training appropriate to their roles and responsibilities to keep up to date with best practice guidelines.

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

- Where staff needed to support people with their meals, this was carried out in a way which ensured the person used their skills as much as possible to maintain independence.
- Where people required support from external healthcare professionals, this was arranged, and staff followed guidance provided by such professionals.

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

- People told us that staff were always on time and that they always provided good quality care that met their needs.
- Information was shared with other agencies if people needed to access other services such as hospitals. This ensured they received consistent and effective care.
- Staff recognised where other professionals could support people to become more independent, and made appropriate referrals to them, for example, to an occupational therapist.
- Care files contained information about each person's health needs and the support they required to remain as independent as possible.

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

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 they lack mental capacity to take 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 with appropriate legal authority. Applications must be made to the Court of Protection when people live in their own homes. We checked whether the service was working within the principles of the MCA.

- Staff ensured people were involved in decisions about their care; and knew what they needed to do to make sure decisions were taken in people's best interests. People told us they could make individual choices and decisions about their daily lives.
- Care plans were developed with people and we saw that people had agreed with the content and had signed where they were able to receive care and treatment.

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; respecting equality and diversity

- People and relatives told us they felt supported. People's equality and diversity needs were discussed and recorded. The registered manager told us people could be given a choice of male and female care staff with different ethnicities and gender identities should the need arise. People's preferences were recorded on the staff plan. This meant people were able to choose staff who they felt comfortable with and who could meet their needs. One person told us, "They are great staff, just like family, I just really like the people."
- Where people were unable to communicate their needs and choices, staff understood their way of communicating. Staff observed body language, eye contact and simple sign language to interpret what people needed. Staff listened to what people wanted regarding care and support and acted on their wishes, where possible. One person told us, "I am really happy with the care and support I receive."
- The staff acknowledged special events in people's lives, such as, birthdays and each person was remembered at Christmas.

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

- People were treated respectfully and were involved in every decision possible.
- Staff supported people to make decisions about their care and knew when people wanted help and support from their relatives. Where needed, they sought external professional help to support decision making for people.
- Staff directed people and their relatives to sources of advice and support or advocacy. People had access to advisors or advocates should they need it.

Respecting and promoting people's privacy, dignity and independence

- People said they were treated with compassion, dignity and respect. They told us staff addressed them by their preferred name, gave them eye contact when conversing with them and were always polite and respectful when in their company.
- People appeared comfortable and their personal care needs were met. They told us staff demonstrated a friendly approach which showed consideration for their individual needs. One person said, "Staff are very kind and respectful. That's what I like about them."
- There was a policy on confidentiality and staff were provided with training about the importance of confidentiality. Information about people was shared appropriately. We saw people's files were kept secure in filing cabinets and computers were password protected to ensure information about people complied with the General Protection Data Regulation (GDPR).
- Staff were supportive in helping people to remain as independent as possible. People were offered choice and control in their day to day lives. One relative told us, "The staff do go the extra mile. I picked my relative up from the day centre once and their hair was just absolutely beautiful. The staff had done that, I was so

pleased. They have even walked the dog in the past as well."

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

- An assessment was carried out prior to the start of the service, to identify each person's support needs. Care plans were developed outlining how these needs were to be met. Involving people in this assessment helped to ensure support was planned to meet people's individual care preferences.
- Care plans and risk assessments contained relevant information and were up-to-date.
- Staff were knowledgeable about the people who used the service and displayed a good understanding of their preferences and interests, as well as their health and support needs, which enabled them to provide personalised care.
- People and their representatives were involved in reviews of their care. This made sure care plans were current and reflected people's preferences as their needs changed.
- The service met people's communication needs as required by the Accessible Information Standard (AIS). The standard sets out a specific, consistent approach to identifying, recording, flagging, sharing and meeting the information and communication support needs of people who use services. The standard applies to people with disability, impairment or sensory loss.
- People's needs were identified, including those related to protected equality characteristics.

Improving care quality in response to complaints or concerns

- There was a complaints procedure and information was provided to help people understand the care and support available to them. All complaints had been dealt with appropriately by the registered manager and resolved.
- People and families knew how to provide feedback to the management team about their experiences of care and the service used a range of accessible ways to enable this to happen. This included one-to-one meetings to discuss care, satisfaction questionnaires and telephone calls.
- The registered manager told us they would use any complaints or concerns received as an opportunity to improve the service.

End of life care and support

- Staff were aware of good practice and guidance in end of life care and knew to respect people's religious beliefs and preferences.
- The registered manager explained that, when required, people would be supported to make decisions about their preferences for end of life care. Professionals would be involved as appropriate to ensure people were comfortable and pain free

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 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

- People were happy with the care they received, and the culture of the service was kind and caring with a focus on ensuring people received person-centred care that met their needs in a timely way. It was evident staff knew people well and put these values into practice.
- The registered manager and staff understood their roles and responsibilities.
- Staff told us they felt listened to and that the registered manager was approachable. They understood the provider's vision for the service and told us they worked as a team to deliver high standards of care. The provider understood and acted on the duty of candour, which is their legal responsibility, to be open and honest with people when something goes wrong.
- A range of quality audits were completed to assess the quality of care provided. Actions to make improvements were identified in the audits and were addressed.
- When incidents happened, the registered manager informed people and families about this and ensured action was taken to reduce the risk of further instances taking place.

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

- Systems and processes were operated effectively to ensure the service was assessed or monitored for quality and safety in relation to the fundamental standards.
- The registered manager was mindful of staff's health and welfare. Staff morale was high and the atmosphere in the office and out in the community was warm, happy and supportive.
- Our observations were that it was well run and people who used the service were treated with respect and in a professional manner.

Provider plans and promotes person-centred, high-quality care and good outcomes for people.

- The service benefited from having a provider who was also the registered manager. They were committed to providing good quality care to people who used the service.
- Staff training records and individual copies of staff training certificates evidenced there is a high priority on providing staff with the skills and knowledge to do their job.
- We saw evidence of audits completed for a range of checks including care plans, medicine administration charts, social progress reports, daily notes and consent. The provider also completed unannounced spot checks, to ensure staff were completing person centred care.
- Relatives said, "Communication from the office is very good, I have never had a problem getting hold of anyone to help or talk to," and, "They are just great – no I would say marvellous people, just superb service."

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

- Regular checks were carried out by the registered manager to ensure people were safe and happy with the service they received.
- There was a commitment to provide person-centred, high-quality care by engaging with everyone using the service. The registered manager advised us they were in the process of sending out their first years' service satisfaction questionnaires to monitor service quality.
- Where people had raised minor issues to the registered manager, each one was addressed. An action plan was produced and detailed the action taken to resolve each issue.

Continuous learning and improving care

- There was good communication and staff were given the opportunity to discuss the service, policies and procedure and to update on any changes in people's needs or support. One staff member told us, "It is just a lovely service to work for. We can discuss anything with the manager and we all get on like really well together."
- The registered manager demonstrated an open and positive approach to learning and development. Supervision sessions and observations also helped to ensure that staff were aware of how to provide good quality care. Work was ongoing to ensure effective ways of working were sustained.

Working in partnership with others

- The management team worked in partnership with the local authority safeguarding team and other healthcare professionals to ensure people received care that met their needs.
- The service had good links with the local community and worked in partnership with other agencies to improve people's opportunities and wellbeing.