

Lincoln Healthcare Group Limited

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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 well-led?

Good ●

Summary of findings

Overall summary

About the service

Lincoln Healthcare Group Limited is a domiciliary care agency providing personal care and support to people living in their own homes. The service provides support to people living with a range of conditions including dementia, learning disabilities and autism. At the time of our inspection there were 42 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

We expect health and social care providers to guarantee people with a learning disability and autistic people respect, equality, dignity, choices and independence and good access to local communities that most people take for granted. 'Right support, right care, right culture' is the guidance CQC follows to make assessments and judgements about services supporting people with a learning disability and autistic people and providers must have regard to it.

Right support

Staff focused on people's strengths, staff supported people to take part in activities and pursue their interests in the local area. People were supported to maintain a safe and clean environment that met their sensory and physical needs. Staff supported people to make decisions following best practice in decision-making.

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.

Right care

People received kind and compassionate care. Staff protected and respected people's privacy and dignity. They understood and responded to their individual needs. People received care that supported their needs and aspirations, was focused on their quality of life, and followed best practice. Staff and people cooperated to assess risks people might face. Where appropriate, staff encouraged and enabled people to take positive risks. The service had enough appropriately skilled staff to meet people's needs and keep them safe.

People were happy and content. They received person-centred care where they were at the heart and focus of the support provided to achieve positive outcomes.

Staff understood how to protect people from poor care and abuse. The service worked well with other agencies to do so. Staff had training on how to recognise and report abuse and they knew how to apply it.

Right culture

People were empowered because of the ethos, values, attitudes and behaviours of the management team and staff. People were supported by staff who understood best practice in relation to the wide range of strengths, impairments or sensitivities people with a learning disability and/or autistic people may have. This meant people received compassionate and empowering care that was tailored to their needs. Staff placed people's wishes, needs and rights at the heart of everything they did.

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

Rating at last inspection

The last rating for this service was good (published 1 December 2017) and we made recommendations around medication procedures and records. At this inspection we found improvements had been made.

Why we inspected

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

For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Lincoln Healthcare Group Limited on our website at www.cqc.org.uk.

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.

<p>Is the service safe?</p> <p>The service was safe.</p> <p>Details are in our safe findings below.</p>	<p>Good ●</p>
<p>Is the service well-led?</p> <p>The service was well-led.</p> <p>Details are in our well-led findings below.</p>	<p>Good ●</p>

Lincoln Healthcare Group Limited

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

The inspection team consisted of 1 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 11 April 2023 and ended on 21 April 2023. We visited the location's office on 21 April 2023.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. We reviewed information we received from the local authority, professionals who work with the service and Healthwatch. Healthwatch is an independent consumer champion that gathers and represents the views of the public about health and social care services in England. We used 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 spoke with 5 people who used the service and 2 relatives to gather feedback on the care and safety of the service.

We spoke to staff, including the registered manager and the nominated individual. 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 3 people's care records, multiple medication records and maintenance and safety certificates. We looked at a variety of records relating to the management of the service, including 3 staff recruitment records and quality assurance procedures.

Is the service safe?

Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm.

At our last inspection we rated this key question requires improvement. At this inspection the rating has changed to good. This meant people were safe and protected from avoidable harm.

Using medicines safely

- At our last inspection we recommended the provider update their medicines management processes to ensure they are in line with The National Institute for Health and Care Excellence (NICE), including their medicines policy. At this inspection the provider had made improvements.
- Medicines were managed safely. People received their medicines as prescribed.
- People's medicines were administered by staff who had training in medicine management. One person told us, "I get my tablets off the carers when I need them ,they [staff] do sign for them on my chart."

Systems and processes to safeguard people from the risk of abuse

- Safeguarding policies were in place to protect people from harm. The registered manager was aware of their responsibilities and knew how to manage and report concerns correctly. We saw evidence of robust safeguarding during the inspection.
- Safeguarding training was in place for all staff which included refresher training, when needed. Staff said they felt supported by the management team and were able to contact them at any time. Staff were clear on how to report a concern.
- One person told us, "I am never left alone so I know I am completely safe." A family member told us, "I now have peace of mind ,this has allowed me after many years to go out knowing [person] is completely safe."

Assessing risk, safety monitoring and management

- Risks were assessed, and actions were put in place to keep people safe.
- Staff and people were confident in reporting concerns to the management team. They had confidence in the registered manager to manage these appropriately and implement change to improve the service and keep people safe.

Staffing and recruitment

- There was enough staff to meet the needs of the people.
- Staff were appropriately trained and spot checks had been developed to monitor staff practices.
- People told us, "They [staff] are never late and I am never rushed I couldn't be happier."

Preventing and controlling infection

- We were assured that the provider was using PPE effectively and safely. One person told us, "Yes when appropriate the carers wear PPE."
- We were assured the provider was responding effectively to risks and signs of infection.
- We were assured 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.
- The provider reviewed lessons learnt when things went wrong and took action to reduce the risk of recurrence.
- Lessons learnt from incidents were cascaded to the team through face-to-face meetings and electronic communications.

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.

At our last inspection we rated this key question good. At this inspection the rating for this key question has remained 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

- There was a positive, inclusive, and empowering culture in the service.
- People made positive comments about the culture. A family member told us, "As a family we could not ask for a better company to help support my daughter. "
- A relative told us, "Amazing Amazing Amazing ,this is what I think about Lincoln ,before they came things were very different for my mother and for me. I can't fault anything that they [staff] do."

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.
- We reviewed examples of documentation relating to duty of candour during the inspection.

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

- The registered manager understood their regulatory responsibilities and notified CQC of significant events. They had the skills, knowledge and experience to perform their role and a clear understanding of people's needs and oversight of the services they managed.
- The provider's had audits and checks in place to monitor the quality and safety of the service.
- People spoke positively about the management. One person told us, "I did make a complaint about 6 months ago and it was sorted straight away which was great." Another told us, "I know that the manager is only a phone call away if I have any problems ,this has never happened."

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

- The provider had a system to gain the views of relevant people, staff and partner organisations about the service. Surveys were used to receive feedback on the way the organisation performs. These were sent to the relevant people.
- Staff meetings were taking place and a record was kept of these for those who could not attend.
- A relative told us, "Communication is excellent with the carers and the management and I receive regular emails with any updates that I may need."

Continuous learning and improving care; Working in partnership with others

- The management team were committed to continuous and sustained improvement to the quality of care with a clear strategic plan.
- The organisation had established effective working relationships with other agencies and professionals involved in people's care which were evident in the care plans we reviewed. The provider gave examples where they had worked through problems as part of a multi-disciplinary teams, working to good effect.
- One person told us, "The ladies seem to have been well trained in coping with someone with her condition." Another told us, "I have my care plan reviewed each year unless anything changes and then it is written down."