

Guardian Homecare UK Ltd

Guardian Homecare (Lighthouse View)

Inspection report

Lighthouse View, Chatsworth Avenue
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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

Guardian Homecare (Lighthouse View) is registered to provide personal care to people living in specialist 'extra care' housing. At Lighthouse View there are 72 self-contained flats. There are also two communal areas on the ground floor and gardens that people can use if they wish. At the time of this inspection, there were 32 people living at Lighthouse View who were supported with personal care.

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

People felt safe and were protected against the risk of abuse. People received support from a consistent team of staff who knew them well. Staff were recruited safely and there were enough of them to meet people's needs. Where people were supported to take their medicines, staff did so safely. The provider had robust infection prevention and control procedures to protect people from cross infection. We have made a recommendation about reporting accidents and incidents.

People's needs were thoroughly assessed before they received support to ensure they received the support they required. People received care from staff who were trained, competent and well-supported to carry out their role. Staff provided the support people needed with meals and drinks. The service worked with healthcare services to ensure people received the support they needed to maintain and improve their health. People made decisions about their care and their rights were protected. 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.

People were supported by staff who were kind and caring. People spoke highly of the staff who supported them and the service as a whole. Staff respected and promoted people's privacy, dignity and independence. Staff asked people for their views about their care and respected the decisions they made.

The service was responsive to people's needs and took account of their preferences. People received person-centred care. The provider had an effective procedure for receiving and responding to complaints about the service. The service could support people to remain at home as they reached the end of life.

The registered manager had developed a positive, person-centred culture within the service. The registered manager and staff team were committed to providing people with high-quality care. The registered manager understood their responsibilities under the duty of candour. The provider used feedback and the results of audits to continually improve the service.

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

Rating at last inspection

This was the first inspection for the service.

Why we inspected

This service was registered with us on 16 March 2020 and this is the first inspection.

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 ●

Guardian Homecare (Lighthouse View)

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.

We looked at infection prevention and control measures under the Safe key question. We look at this in all care home inspections even if no concerns or risks have been identified. This is to provide assurance that the service can respond to COVID-19 and other infection outbreaks effectively.

Inspection team

This inspection was carried out by one inspector.

Service and service type

This service provides care and support to people living in specialist 'extra care' housing. Extra care housing is purpose-built or adapted single household accommodation in a shared site or building. The accommodation is rented and is the occupant's own home. People's care and housing are provided under separate contractual agreements. CQC does not regulate premises used for extra care housing; this inspection looked at people's personal care and support service.

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

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 registered manager would be in the office to support the inspection.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority and professionals who work with the service. We used the information the provider sent us in the provider information return. This is information providers are required to send us with key information about their service, what they do well, and improvements they plan to make. This information helps support our inspections. We used all of this information to plan our inspection.

During the inspection

We spoke with four people who used the service and two people's relatives about their experience of the care provided. We spoke with six members of staff including the regional manager, registered manager, scheme manager and care workers.

We reviewed a range of records. This included four people's care records and medication records. We looked at four staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including policies and were reviewed.

After the inspection

We continued to seek clarification from the registered manager to validate evidence found. We looked at training data and quality assurance records.

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 Good. This meant people were safe and protected from avoidable harm.

Learning lessons when things go wrong

- The provider had systems to identify and learn from any incidents. Staff recorded any accidents, incidents and near misses, which the registered manager analysed for any learning. Incidents were also analysed by the provider's regional and central management teams. Any learning from untoward incidents was shared with the staff team at all the provider's locations, to help improve the safety of the service.
- We found two incidents which staff had not reported and recorded correctly, in line with the provider's policy and procedure. The management team were unaware of the incidents until we alerted them to what we had found. The registered manager took action immediately to investigate and carried out additional training with staff to remind them of the importance of reporting accidents and incidents.

We recommend the provider reviews their systems and staff training in relation to accident and incident reporting, and ensure staff understand their responsibilities in relation to reporting and recording information.

Systems and processes to safeguard people from the risk of abuse

- People were protected from the risk of abuse. People told us they felt safe with staff who provided care and support to them. One person told us, "I feel safe. I trust them." A relative commented, "Safe? Yes, very safe." Staff were trained to identify and report abuse. They told us they would report any concerns to a member of the management team and were confident action would be taken to protect people. Staff knew how to report concerns to external agencies if necessary.

Assessing risk, safety monitoring and management

- Risks to people's health and safety were assessed and managed. Staff carried out a thorough initial assessment with people, to ensure their needs and preferences could be met safely.
- Staff knew people well and how to deliver care safely. Staff followed risk assessments and received training that was individualised to people, for example, moving and handling, which helped to manage risks and keep people safe.

Staffing and recruitment

- There were enough staff to support people safely. People received care from a consistent team of staff who knew them well. Staffing was well organised, so people received visits from staff as planned. People told us staff would contact them if there was going to be any significant delay. Staff told us they had a good team who helped each other out to make sure people's needs could be met. Staff told us they felt the service was well organised.
- Staff were recruited safely. The provider carried out checks to ensure staff were of good character before

they were employed. This included checks on criminal records and references from previous employers. Staff had to complete a probationary period at the start of their employment to show they were able to carry out their role satisfactorily.

Using medicines safely

- People received the support they needed to take their medicines. Staff supported people to have their medicines as prescribed. Staff were trained in how to support people with their medicines and had their competence assessed by management. This included training specific to people's needs. Staff completed thorough records of the support they had given to people. The management team audited medicines administration regularly.

Preventing and controlling infection

- People were protected from the risk of infection. Staff were trained in preventing infection and using Personal Protective Equipment (PPE) effectively to reduce the risk of infection. They had completed training in how to put on, take off and dispose of PPE safely. Staff told us the provider had ensured they had appropriate protective equipment, such as face masks, disposable gloves and aprons throughout the COVID-19 pandemic. People told us staff used PPE when delivering care.

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 and preferences were thoroughly assessed before the service agreed to provide care. This helped to ensure the service was suitable to meet people's needs. People, or those acting on their behalf, were involved in the assessment process so that their preferences and wishes were taken into account in care planning. Care plans were easy to follow and gave staff information about people's preferred routines as well as their care needs.

Staff support: induction, training, skills and experience

- Staff had skills and knowledge to carry out their roles effectively. Staff told us they completed a range of training to give them the skills and knowledge to provide people's care. People told us they were confident staff were equipped to fulfil their roles. Comments from people included, "The staff are well trained." And, "I think they are good, they know what they are doing and what I need." A relative commented, "[Family members] are happy with them, impressed by them."
- Staff were well supervised and supported. Staff had regular meetings where they could discuss their roles and training needs. Staff said they felt well supported by the management team. Staff explained the management team had supported them with both work issues and personal issues and were available if they needed support.

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

- Staff worked with other agencies, such as district nurses and social workers to ensure people's needs were met. Community based health professionals provided guidance to support people with ongoing health conditions.
- The service helped people to access healthcare services when they needed them. People explained they were able to change visits to accommodate appointments and procedures. Staff told us they knew people well enough to recognise any signs if people were developing an illness and would contact the management team to raise the alarm.

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

- People were satisfied with the support they received with eating and drinking. Not everyone required support with their nutrition or preparing meals. However, where this was part of people's support, details were included in their care plans. Information included people's likes and dislikes.

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. We checked whether the service was working within the principles of the MCA.

- People maintained control of their lives and their rights were protected. People we spoke with told us they chose what support staff provided to them and we could see from records we reviewed that people's preferences and wishes were taken into account.
- The registered manager and staff understood their responsibilities under the MCA. Staff were trained to ask people what support they wanted and to respect the decisions they made. Staff told us they would respect a person's right to refuse care. They said they would inform management if someone refused an important aspect of their care. This meant the provider could take action if refusing care placed a person at risk.
- There was no one being supported by the service who required restrictions on their liberty to receive the care they required.

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; Respecting and promoting people's privacy, dignity and independence

- People were treated with respect by staff who were kind and caring. People told us they liked the staff who visited them and valued the support they provided. People described staff as friendly, caring and helpful.
- The registered manager had fostered a caring and respectful culture among the staff team. Staff told us they enjoyed supporting people and making a difference for them.
- Staff understood the importance of supporting people to maintain their independence. Staff supported people to do what they could themselves, without taking over. For example, one person told us they had spent several years in a nursing home and were 'stiff'. They said now they 'do not stop'. They explained this was due to support and encouragement they had received from staff at Lighthouse View.

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

- People were fully involved in shaping their package of care. Staff completed thorough assessments with people, or those acting on their behalf, before support was provided. People told us they chose what support they received from staff and when. This was kept under regular review by the management team, who people confirmed contacted them to ask for their views of the support they received.

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's care was planned around their needs, choices and wishes. The management team worked with people, and those acting on their behalf, to ensure planned care continued to meet their requirements. The registered manager and senior staff reviewed people's planned care regularly and immediately if there was a change in someone's needs.
- The service was very responsive to people's individual needs. People explained how staff had got to know them and their preferences. Feedback from people was positive and included examples of staff 'popping in' to see someone whilst their wife was in hospital, to provide reassurance. Also being able to easily change the times of care visits to work around healthcare appointments.

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.

- The provider assessed people's communication needs to identify how they needed information to be provided. This was recorded in people's care records to guide staff on how to share information with them.

Improving care quality in response to complaints or concerns

- The provider had a policy and procedure for receiving and responding to complaints about the service. Guidance about how people could raise concerns was included in the information given to people. Staff told us they would support people to raise concerns or make a complaint. People and relatives we spoke with told us they could simply speak with the registered manager or scheme manager and were confident they would resolve any issue.
- Complaints were used as an opportunity to learn and improve the service. The registered manager logged and investigated all complaints. The service had received one complaint since opening in September 2020. The registered manager told us any learning or actions taken from complaints were shared with staff to help improve the service.

End of life care and support

- The service worked with other agencies to ensure people were supported, where possible, to remain in their homes as they reached the end of their lives. The staff had received training in supporting people who required end of life care. No one was receiving end of life care at the time of our inspection.

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

- The registered manager had developed a positive culture which put people at the heart of the service. Everyone we spoke with told us they would recommend the service. Staff told us they were all committed to making a difference to people and enjoyed working for the company.

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 registered manager and staff team understood their responsibilities under the duty of candour. The provider had notified us of significant events, as required. The notifications showed the provider had been open and honest and shared information about incidents with relevant people.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; Continuous learning and improving care

- The registered manager and staff were clear about their roles and responsibilities. We received positive feedback about the registered manager, their approach and how they managed the service. People who used the service, relatives and staff all described the service in positive terms and told us they would recommend the service to others.
- The provider was committed to the continuous improvement of the service. They assessed the quality of the service to identify how it could be further improved. Methods they used included regular reviews of people's care, satisfaction surveys, regular observations of staff and audits.

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

- The provider used systems to gather people's views about the service. People were asked for feedback during review meetings.
- Staff felt engaged and able to share their views of the service. Staff told us they could approach the registered manager with any views or suggestions to improve the service and were asked for feedback.
- The COVID-19 pandemic had caused some difficulty in engaging with the public. However, the registered manager was in the process of looking into planning events to engage with the public and raise the profile of the service.

Working in partnership with others

- The service worked with other agencies to ensure people received the care they needed. Staff liaised effectively with other services, such as community professionals and social workers, to ensure people received the support they needed.