

Richardson Trading Ltd

# Red Rose Care

## 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

This report was created as part of a pilot which looked at new and innovative ways of fulfilling CQC's regulatory obligations and responding to risk in light of the Covid-19 pandemic. This was conducted with the consent of the provider. Unless the report says otherwise, we obtained the information in it without visiting the provider.

### About the service

Red Rose Care is a domiciliary care agency based in Bamber Bridge on the outskirts of Preston. The agency provides personal care to a wide range of adults in their own homes, including older people, people living with dementia, people with a learning disability or autistic spectrum disorder or a physical disability. At the time of our inspection the service supported 39 people.

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

People were safe using Red Rose Care. Systems, processes and practices adopted by the service protected people from harm and safeguarded them from the risk of abuse and discrimination. Potential risks were thoroughly assessed, and medicines were managed safely. One person told us, "I feel safe with the girls [carers] as I hardly have any family. They make me feel safe. I feel as if the carers are in my bubble."

Particular attention had been given to infection control practices during the pandemic in order to keep those who used the service and the staff team safe. Systems were in place so that lessons were learned when things went wrong.

Robust recruitment practices were in place. The staff team was consistent, and the support provided to people promoted continuity of care. A wide range of training had been provided for the staff team around health and safety matters and safeguarding issues, which helped to ensure people received safe care and treatment.

The management and staff team were open and transparent during the inspection process. A wide range of regular audits and monitoring was taking place. We received very positive feedback about the registered manager and the staff team. Community health and social care professionals had been involved in the care and support of those who used the service.

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

### Rating at last inspection

The last rating for this service was good (published 06 July 2019).

### Why we inspected

This was a planned pilot virtual inspection. The pilot inspection considered the key questions of safe and well-led and provided a rating for those key questions. The ratings for the key questions effective, caring and

responsive are those awarded at the last inspection.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Routes Healthcare on our website at [www.cqc.org.uk](http://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?**

**Good** ●

The service was safe.

Details are in our safe findings below.

### **Is the service well-led?**

**Good** ●

The service was well-led.

Details are in our well-Led findings below.

# Red Rose Care

## Detailed findings

### Background to this inspection

#### The inspection

As part of a pilot into virtual inspections of domiciliary and extra-care housing services, the Care Quality Commission conducted an inspection of this provider on 04 November 2020. The inspection was carried out with the consent of the provider and was part of a pilot to gather information to inform CQC whether it might be possible to conduct inspections in a different way in the future. We completed this inspection using virtual methods and online tools such as electronic file sharing, video calls and phone calls to gather the information we rely on to form a judgement on the care and support provided. At no time did we visit the provider's or location's office as we usually would when conducting an inspection.

#### Inspection team

The inspection team consisted of two inspectors, a medicines 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 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

We gave the service 48 hours' notice of the inspection. This was because we needed to be sure the provider or registered manager would be available to support the inspection.

Inspection activity started on 09 November 2020 and ended on 30 November 2020.

#### Before the inspection

Prior to our inspection we checked all the information we held about the service. This included any notifications the service is required to send to us by law, any allegations of abuse or feedback about the service. We used all this information to plan our inspection.

The provider had submitted a completed provider information return prior to this focussed virtual 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 into account when we inspected the service and made the judgements in this report.

During the inspection-

We spoke with four people who used the service and eight relatives about their experience of the care provided. Everyone provided us with positive comments. We spoke with nine members of staff, including the registered manager. We reviewed a range of records. These included five care files, medication administration records, three staff files, training records and associated documentation relating to the operation and management of the service.

After the inspection

We continued to seek clarification from the provider 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.

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- The provider had effective systems and processes in place to protect people from the risk of abuse and discrimination.
- Detailed safeguarding policies were in place and good reporting systems had been implemented, so that all relevant authorities were notified of any allegations of abuse with appropriate action being taken.
- People told us they felt safe receiving support from their care workers and relatives felt their loved ones were safe using the service. The friend of one person told us, "We both feel safe and supported by Red Rose, as it was difficult putting care into place, but the care has increased, and my friend is happy."
- All staff were trained in safeguarding procedures and those we spoke with knew what to do if they were concerned about the well-being of people they supported.

Assessing risk, safety monitoring and management; Learning lessons when things go wrong

- The provider had developed systems to ensure people were kept safe and free from harm.
- A range of regular checks had been conducted and risks had been assessed with strategies implemented to reduce the level of potential harm.
- Systems were in place which provided staff with clear guidance about health and safety matters and accurate recording of incidents. Staff had documented accidents and incidents and where required they had requested medical advice.
- The staff team were trained in health and safety matters and were fully aware of the importance of keeping people safe. The provider had emergency contingency plans in place and people said they or their loved ones felt safe using the service. Staff told us they were well supported, and people were protected from harm.
- The provider had protocols for identifying lessons that could be learnt following incidents or significant events across the organisation. The provider used this information to improve the quality of service provided.

Staffing and recruitment

At our last inspection we recommended the provider consider current guidance on undertaking staff recruitment checks and take action to update their practice accordingly. The provider had made improvements.

- People were supported by a consistent staff team, who were fit to work with vulnerable people.
- Safe recruitment practices had been adopted and competencies of staff were checked. All new employees received a starter pack, which provided them with important information and development plans to help

them to fulfil their role.

- Staff felt there were enough care staff appointed to ensure all visits could be covered.

### Using medicines safely

At our last inspection we recommended the provider consider current guidance on managing covert medicines, managing joint responsibility of medicines and updating their practice accordingly. The provider had made improvements in these areas of medicine management.

- The provider had systems in place which helped to ensure peoples' medicines were managed safely. However, we found for one person the Medicine Administration Record was confusing, as it was not clear if the amount recorded was the strength of the medicine or the prescribed dose. This was discussed with the registered manager and we are confident this will be addressed without delay.
- Any allergies were clearly recorded, and the level of assistance individual people needed was well documented. Guidance was available for staff to help in supporting people to manage their medicines safely.
- Thickeners used to thicken fluids for people with swallowing difficulties were recorded and risk assessments were in place for those who self-administered their medicines. Staff had received medicines training and their competencies were assessed regularly to make sure they had the necessary skills to support people with their medicines in a safe manner.
- Body maps were used to ensure topical creams and ointments were applied safely and blood tests were completed as indicated by the National Institute for Health and Care Excellence guidance. All records checked clearly stated if the person had any allergies, reducing the chance of someone receiving a medicine they are allergic to.

### Preventing and controlling infection

- The provider had systems and guidance in place, which helped the staff team to maintain good infection control practices.
- Staff had received relevant training and personal protective equipment was consistently available. One member of staff told us, "Senior team leaders have been out and checked correct donning and doffing by carers and sign that staff understand it and have been trained." Another commented, "I have done the training [Coronavirus] and I feel confident to apply the guidance in donning and doffing. We get spot checks to ensure we are compliant. We are updated when there are any changes."
- Specific attention had been given to the current pandemic, so people and staff were protected and kept free from harm. All the necessary guidance, precautions and equipment was available, and the provider had supported staff to be safe in their working day. One relative commented, "Our carers change into PPE in the drive and when they go, they put their gloves in the bin." Another family member told us, "My relative seems comfortable with the carers and they seem confident with what they are doing. They wear a visor, mask, apron and gloves as well."



# 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 the last inspection this key question was rated as good. At this inspection this key question remained the same. 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 and the staff team promoted a positive culture which achieved good outcomes for people.
- People and their relatives were all complimentary about the service provided by Red Rose Care.
- The provider regularly sought a good range of feedback from people and their loved ones, as well as the staff team, which was consistently positive.
- People were treated equally and their human rights were protected.

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 systems in place, which supported the staff and management team to be open and honest when things went wrong. People told us the service was managed in an open and transparent way.
- Systems had been implemented to ensure accidents, incidents and safeguarding events were managed in an open and honest way. This helped to ensure everyone involved was kept up to date with progress and the staff team learnt lessons from situations when things went wrong. This supported the duty of candour standards.
- Managers and the staff team were co-operative throughout the inspection process. They demonstrated good knowledge of the service and the needs of those who used Red Rose Care. During the inspection information was provided promptly when requested and managers and the staff team demonstrated an open and honest culture had been adopted by the service.
- The client app installed on the new technology allows for ease of transfer of information, instant access and the ability for Red Rose to be fully transparent in order to build effective and open relationships.

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

- The provider had systems in place which effectively monitored the service. Management meetings were held, and all relevant information was cascaded to the staff team.
- The provider conducted a range of regular audits to check quality and safety. Internal practices were embedded to check on staff performance and management systems. Records demonstrated that regular audits had been completed.
- The provider had developed action plans in response to the auditing process. This helped the service to identify any areas of risk, to make continuous improvements and to learn lessons when things went wrong.

- Systems had been introduced to help the staff team to provide the care and support people needed. Staff felt they were supported in a positive way by the managers of the service. Carers awards had been introduced since the last inspection, so that any special efforts were recognised. The provider told us this had promoted positive working, boosted morale and ensured clients voices were heard.
- A detailed business contingency plan had been developed to ensure staff were aware of actions they needed to take in the event of an emergency.

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

- A wide range of information was available for people and staff. It was clear strong links had been developed with families, as well as health and social care professionals.
- People and relatives provided very positive feedback about the service, the managers and staff team.
- Surveys had been conducted with people, relatives and staff members and action plans had subsequently been developed. People spoke highly of the registered manager. One person told us, "The manager has already been in touch and visited to make sure everything was OK. We were allocated Red Rose, but I am happy and feel supported by the organisation."

Continuous learning and improving care

- The provider had systems to ensure the staff team were continuously learning to consistently improve the care provided. A wide range of updated policies and procedures were available for the staff team. The policy of the month was distributed to all employees to help the staff team to keep up to date with current legislation and good practice guidelines.
- Since the last inspection Red Rose has introduced technology which has significantly reduced the amount of paperwork to be completed by carers. Therefore, this enables staff to focus more on the quality of care provided and building relationships with service users and their families. The system provides all round business support, as well as a client app and a carers app. The provider tells us this has enabled Red Rose to operate more efficiently and effectively, allowing the business to focus on and prioritise the quality of care over anything else.
- The registered manager carried out regular spot checks to oversee staff performance and to check the quality of care and people's experiences. Supervision records were constructive and care plans were of a good quality with any improvements being made accordingly. One member of staff told us, "The management really do support us. It's a brilliant company to work for."
- People were encouraged to make suggestions about possible improvements or to comment on current practices. One relative told us, "I think Red Rose is a well led and professional organisation. All staff are very approachable." And a staff member commented, "I have no concerns. They [Red Rose] put the client first and want to do everything they can."
- Regular meetings took place and there was a genuine commitment to develop leadership in the organisation. We saw a clear action plan was in place on how aspiring leaders were supported with regular development meetings which were referred to as 'A great place to work group'.

Working in partnership with others

- The provider had developed good partnership working with external professionals and stakeholders in the community to ensure people's health and social care needs were being fully met.
- Staff worked in partnership with people and relatives to ensure care was delivered in a way which met their needs. One relative told us, "I have no complaints about the organisation. I am happy and comfortable speaking with the office staff. I haven't had to complain but would do if I needed to. They are very approachable and the communication from the office is very good."
- The staff team continued to have access to best practice guidance on meeting people's needs in a person-

centred way. There was a clear understanding throughout the organisation on what quality care looked like and what was expected of staff.