

Retain Healthcare Ltd

Retain Healthcare Ltd, Chippenham

Inspection report

Unit 7
Industry Park, Cricketts Lane
Chippenham
SN15 3EQ

Tel: 01249444900
Website: www.firstcitynursing.co.uk

Date of inspection visit:
12 November 2021

Date of publication:
30 December 2021

Ratings

Overall rating for this service

Good ●

Is the service safe?

Requires Improvement ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

About the service

Retain Healthcare Ltd, Chippenham is a domiciliary care service providing care and support to people living in and around Chippenham. 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

Risks to people's safety had been identified, assessed and management plans put into place to mitigate risks. Changes had been made to risk management following a serious incident which the provider had reflected on and implemented improvements.

Incidents and accidents had not always been recorded on the providers incident system which meant action taken in response was not recorded. Whilst the provider could demonstrate staff had reflected on incidents and identified improvements, this did not evidence the providers response and action taken. We have made a recommendation about reviewing incident recording.

People had their medicines as prescribed; however, for one person staff had not carried out a safety check with the prescriber. The provider took action during the inspection to carry out this check and make sure staff were administering medicines safely. Staff had been provided with training on medicines management and had their competence to administer medicines checked by senior staff.

People and their relatives told us the service was safe. Staff had been trained on safeguarding and understood how to report any concern they had. Staff were assured the provider would take appropriate action in response to any concern raised.

People had received their visits and told us the staff were reliable. Whilst the provider was actively recruiting more staff there were enough staff available to meet people's needs. All staff had been recruited safely.

Staff were being tested regularly for COVID-19. They had plenty of personal protective equipment and received regular updates on how to work safely during COVID-19. The provider had identified COVID-19 champions who made sure up to date government guidance was being followed by all staff.

People, relatives and staff told us the service was well-led. There was a registered manager in post and a senior team who provided additional management cover. People and relatives were able to share feedback and make suggestions for improvements. Staff had regular staff meetings and felt able to share any views or concerns. People and relatives were happy with the care they received and felt staff were trained and professional.

Quality monitoring systems were in place and identified areas for improvement. There had been a recent

serious incident which had been investigated. The provider had reviewed their systems and processes to make improvement to how they carried out some quality and safety checks. People told us some improvement was needed to communication, so they knew when changes were made to their regular staff. The provider had identified improvements they could make to improve outcomes for people for that area such as providing people with a staff rota.

The service worked in partnership with a range of professionals and met regularly with representatives from the local authority. Staff were providing support to people being discharged from hospital and working with professionals to help people regain independence. People and relatives told us staff were reliable and they would recommend 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

The last rating for this service was good (published 27 September 2019).

Why we inspected

We received concerns in relation to risk and incident management. As a result, we undertook a focused inspection to review the key questions of safe and well-led only.

We reviewed the information we held about the service. No areas of concern were identified in the other key questions. We therefore did not inspect them. Ratings from previous comprehensive inspections for those key questions were used in calculating the overall rating at this inspection.

The provider had taken action to mitigate risks by reviewing systems in place for risk management and monitoring and assessing quality and safety. Please see the safe and well-led sections of this full report.

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

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 not always safe.

Details are in our safe findings below.

Requires Improvement ●

Is the service well-led?

The service was good.

Details are in our well-led findings below.

Good ●

Retain Healthcare Ltd, Chippenham

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.

Inspection team

This inspection was carried out by an 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.

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. Day to day management responsibilities were carried out by a branch manager who was not registered. We have referred to them as the 'manager' in the report.

Notice of inspection

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

Inspection activity started on 9 November 2021 and ended on 2 December 2021. We visited the office location on 12 November 2021.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. We received 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 three people who used the service and four relatives about their experience of the care provided. We spoke with five members of staff, the branch manager, programme manager, a director of the company and the registered manager. The registered manager is also the nominated individual for the provider. The nominated individual is responsible for supervising the management of the service on behalf of the provider.

We reviewed seven people's care records and medication records, risk assessments, incident reports, staff meeting minutes and various records relating to the management of the service. This included various policies and procedures. We also looked at four staff files in relation to recruitment.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at incident and accident records and meeting records. We contacted local commissioners for their feedback about the service.

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 now deteriorated to requires improvement. This meant some aspects of the service were not always safe and there was an increased risk that people could be harmed.

Using medicines safely; Learning lessons when things go wrong

- Incidents and accidents had not always been recorded on incident forms. This meant we were not able to see a clear audit trail of action the provider had taken to keep people safe from harm.
- Whilst staff involved had recorded their learning on reflective learning logs, they did not record a detailed account of what had happened, and the action taken by the provider. The provider told us that all staff are now aware incident forms need to be completed and added to their electronic system so thorough investigations could be completed and actions recorded.
- We reviewed two medicines incidents which had not been recorded on incident forms. We were not able to see what action the provider had taken in response to the incidents and staff were not clear about what actions had been taken. For example, the provider could not be assured staff had checked with a medical professional people were not at risk of harm due to missing their medicines.

We recommend the provider reviews systems in place for recording medicines incidents so that all actions taken in response by the provider are recorded.

- We observed improvement was needed for one person's records for administering medicines covertly. Whilst this decision had been agreed as appropriate for the person by a healthcare professional, staff had not made a check with the prescriber. The provider took action to carry out this check during the inspection.
- The provider employed a clinical nurse who leads on some packages of care. The provider told us the nurse had reviewed staff administering medicines in foods and assessed it was safe. We were not able to see evidence to demonstrate checks had been carried out and what medicines could be given in which specific food or drink. Some medicines are not as effective if given in certain foods.
- Staff had been trained on medicines administration and had their competence checked by the provider. Staff told us they received annual medicines management training to keep them updated.

Assessing risk, safety monitoring and management

- Prior to our inspection we received information of concern about a serious incident whereby staff had not followed one person's risk management plan. During our inspection we observed the person's risk management plan had not been updated in a timely way.
- Management had completed a review of the person's care and support, but updates had not been recorded at the time of the review. In addition, checks of the persons daily notes had failed to identify staff were not following the risk management plan. This meant staff did not have accurate guidance in place to work safely.

- The provider had reviewed their systems and put into place measures to aim to prevent reoccurrence. Staff involved had completed reflective learning logs identifying what they had learned from the incident and what they could do to make improvements.
- The provider was supporting a contract with the local authority to enable people to return from hospital to their homes. These discharges could happen at very short notice which meant staff could be visiting people without full information of their needs and risks.
- Staff told us they tried to ensure core risk assessments were always initially put in place with additional risks assessed and managed as the package progressed.
- For people we reviewed we observed risk management plans were in place to give staff guidance on how to safely support people.

Systems and processes to safeguard people from the risk of abuse

- People and relatives told us they felt safe with the staff. Comments included, "I feel very safe with Retain Healthcare. I have had no missed calls and they have been very efficient", "The care I receive makes me feel safe. They [staff] help me to eat and keep me clean and knowing I have support coming in daily makes me feel safer overall" and "The staff are very professional and confident in their work. I'm pleased with them."
- Staff had been trained in safeguarding and told us they would not hesitate to report any concern. They were all confident management would take the appropriate action to keep people safe.
- The provider worked with the local authority safeguarding team to resolve any concerns.

Staffing and recruitment

- People were able to have their visits when needed as there were enough staff to care for them. People told us sometimes they had different care staff visit them, but they always had someone. Comments from people and relatives about staffing included, "The carers don't feel rushed and cover all their duties with still a little time to chat and I think that's really good for both of us. They are always willing to do extra tasks if required without obligation" and "The staff are very punctual and have the time to discuss any issues where necessary without feeling rushed."
- Staff had been recruited safely. Pre-employment checks had been carried out such as obtaining references from previous employers and a criminal records check.
- The provider told us recruitment was a challenge in the current climate. Finding new applicants was an ongoing struggle despite thinking of new ways to attract new staff.

Preventing and controlling infection

- Staff had access to stocks of personal protective equipment (PPE) and had been trained on how to use it safely. One person told us, "They [staff] have very good hygiene standards and wear protective clothing while working." One relative said, "The staff wear masks and uniforms all the time."
- The provider had identified staff to be infection prevention and control champions to ensure staff were working safely during COVID-19. Government guidance was identified and implemented into day to day practice.
- Staff were being tested for COVID-19 as per the government guidelines and the provider knew which agencies to liaise with if they needed further advice on COVID-19.

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 has 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.

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

- Since the last inspection there had been a change in registered manager. The registered manager was supported to manage the service by a branch manager and other senior staff such as care co-ordinators.
- People and relatives told us the management were approachable. Comments included, "I would be confident in approaching management if there were any issues" and "I have had some communication with management in the first month we used them and office staff were very positive and they are quick to resolve any queries."
- Staff were clear about their roles and were aware of the line management structure at the service. Staff we spoke with told us they were able to approach any of the management for advice or to raise a concern. This included the directors of the organisation. One member of staff said, "[the service] is very well-led, we have a good manager. [name of manager] is approachable, she will deal with any problem."
- Quality monitoring systems were in place and overall they supported the provider to identify where improvement was needed. There had been one incident whereby the daily notes had not been checked which meant discrepancies had not been identified. The provider had responded to this failure by making sure systems were reviewed and action taken to improve oversight.
- The provider told us all learning from any incident was shared across all their branches. Managers met weekly to discuss events and any updates that needed to be implemented.
- The service had a good track record for successfully helping people return to their homes from hospital. The provider assured us they had learned lessons from a review of safety and would continue to closely monitor quality and safety. One healthcare professional told us, 'Retain senior staff, including the CEO, are always receptive to new ideas, constructive criticism and will work actively to improve situations'.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

- People were being cared for by a team of staff who enjoyed their work. Comments from people and relatives about staff and the service were positive. Comments included, "The staff always talk to me all the time while carrying out my care which I think is really nice" , "The staff are very jolly and you can talk to them about anything and this makes the caring process a pleasant experience" and "On reflection, I would say there are a good reliable service. They provide a good help and support if it's needed by trained professionals who care for the individual."
- Staff told us they enjoyed their work and felt the service was well managed. One member of staff told us, "I do like the job, it is different every day."

- The provider told us they promoted a service which aimed to improve outcomes for people. For example, they helped people return to their homes from hospital and worked with people to help them regain independence. One person told us, "If I was to recommend Retain Healthcare, I would say they are 100% reliable and they genuinely try and do their best with the resources available."
- Staff were able to access a suite of rewards and benefits. This included refer a friend schemes, discount shopping schemes and rewards for 'excellence in service'.

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 responsibility to be open and honest with people.
- Management had met with relatives following one notifiable incident, but we were not able to see a formal written apology. The provider told us they were planning to produce a formal apology and would do so once they had additional information they required.

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

- People were able to feedback about the care they received. The provider used surveys to gather views and feedback from people and their relatives.
- Two people told us they felt improvement could be made with communication from the office. They told us they were not always made aware if there were changes to the staff that would be visiting. One person said, "I think on the whole the company is managed very well, but the communication within the office staff could be improved a little and be more informative to their clients of any changes." We shared this feedback with the provider who told us they had already identified this improvement and were already planning what action they could take.
- The provider had different resources in place to support staff. Staff were able to attend regular staff meetings and share their views. Staff told us they felt able to visit the office whenever they needed or phone any of the senior management at any time. There was an on-call system to provide management cover outside of standard office hours.
- Some staff had been able to complete mental health first aid training so they could gain a better understanding of mental health issues. This enabled them to signpost staff to resources if needed to support their mental health and well-being.

Working in partnership with others

- Staff worked in partnership with a variety of professionals to help make sure people's health needs were met. Staff attended daily and weekly meetings with representatives from the local authority and commissioning groups to discuss care packages.
- Professionals were positive about the work the service did to support people. One professional told us, 'I have regular meetings with their care coordinator, and can confirm that their approach is entirely centred around the quality of care and wellbeing of their service users. They work well in conjunction with the other providers to ensure that all calls are accounted for and regularly engage in discussion on ways to improve the quality of care'.