

Shield Recruitment Limited

Shield Recruitment Limited

Inspection report

49 Chapeltown
Pudsey
Leeds
West Yorkshire
LS28 7RZ

Date of inspection visit:
21 January 2020
24 January 2020
28 January 2020

Date of publication:
12 February 2020

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

Shield Recruitment Limited is a domiciliary care agency providing personal care and support to people in their own homes. It provides a service to older people and younger adults. At the time of inspection, the service was providing personal care to one person.

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

The person who used the service said they received safe care and support. Staff understood and managed people's risks. Enough staff were employed to support the person consistently and safely. Staff protected the person from avoidable harm, were knowledgeable about safeguarding and felt able to raise concerns. Systems were in place to recruit staff safely.

People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible; the policies and systems in the service supported this practice. Staff received effective training and support to enable them to care for people well. Staff gained consent to care and understood people's rights to make their own decisions.

Staff were patient, friendly and kind, and made sure they respected privacy and dignity. They had developed positive, caring relationships with the person who used the service. Staff respected the person's privacy and dignity and promoted independence, equality and diversity.

The service assessed needs before people began to use the service. Care plans overall, contained information for staff to support the person according to their needs. Some care plans needed strengthening to ensure more detail. The registered manager updated these during the inspection.

The registered manager completed checks on the quality of the service provided. The provider had a system in place for responding to people's concerns and complaints. Procedures were in place to learn from incidents and accidents. There was an honest and open culture; with regular communication with the person who used the service and staff. The registered manager was responsive to any issues raised during the inspection.

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 14 July 2017).

Why we inspected

This was a planned inspection based on the previous rating.

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?

Good ●

The service was safe.

Details are in our safe findings below.

Is the service effective?

Good ●

The service was effective.

Details are in our effective findings below.

Is the service caring?

Good ●

The service was caring.

Details are in our caring findings below.

Is the service responsive?

Good ●

The service was responsive.

Details are in our responsive findings below.

Is the service well-led?

Good ●

The service was well-led.

Details are in our well-led findings below.

Shield Recruitment 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 Care Act 2014.

Inspection team

One inspector undertook this inspection.

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 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 24 hours' notice of the inspection. This was because it is a small service and we needed to be sure that there would be someone at the office to support the inspection.

Inspection activity started on 21 January 2020 and ended on 28 January 2020. We visited the office location on 21 January 2020.

What we did before the inspection

We reviewed all the information we held about the service. We contacted relevant agencies such as the local 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 all this information to plan our inspection.

The provider was not asked to complete a provider information return prior to this 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 one person who used the service. We also spoke with two members of staff, the registered manager and the office manager.

We reviewed one person's care records, policies and procedures, records relating to the management of the service, including recruitment records, training records and quality audits.

After the inspection

We continued to seek clarification from the registered manager to validate evidence found. This included, updated policies and procedures.

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.

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

- Staff were aware of the risks involved in care provision and could describe what they did to keep people safe. The person who used the service said moving and handling was safe. They told us staff received training in their home to use the equipment needed.
- However, personal risk assessments and environmental risks assessments were not fully complete. The registered manager updated and reviewed these during the inspection.
- Systems were in place which ensured recording and learning from accidents or incidents. There had not been any accidents or incidents since our last inspection.

Systems and processes to safeguard people from the risk of abuse

- Safeguarding procedures were in place. Staff received training in safeguarding adults. They understood different types of abuse and how to report concerns to protect people from harm.
- The protection of vulnerable adults policy did not contain the local authority contact details for staff to refer concerns. However, the office manager confirmed local authority contact details were available at the office. They also updated the policy to reflect this.
- The person using the service said they felt safe when supported by staff. They said, "I have no concerns about safety; everything is fine."

Staffing and recruitment

- Staffing numbers were enough to meet people's needs. People received consistent support, from small teams of staff. The person who used the service confirmed this. They said, "I have the same ones more or less all the time."
- Rotas were well managed. Staff covered each other's absences and worked flexibly to meet the needs of the person who used the service.
- The provider operated a safe recruitment process. They completed checks with the Disclosure and Barring Service (criminal records check) to ensure staff were suitable to work with vulnerable adults.

Using medicines safely

- At the time of the inspection, the provider did not administer medicines to the person who used the service. However, they maintained records of what medicines the person took and when the person took them.
- There was a medicines policy in place. The registered manager updated this during the inspection to reflect the most current guidance for managing medicines for adults receiving social care in the community.
- Staff received training to administer medicines safely and competently.

Preventing and controlling infection

- Good hygiene practice protected people from the risks of infection. Staff had personal protective equipment provided to reduce the risk of cross infection.
- Staff received training in infection control and hand hygiene.

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.

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant people's outcomes were consistently good, and people's feedback confirmed this.

Ensuring consent to care and treatment in line with law and guidance; Assessing people's needs and choices; delivering care in line with standards, guidance and the law

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

- Staff had received training and told us they knew the key principles of the MCA. Staff gained people's consent before supporting them. One staff member said, "[Name of person] is very clear on what she wants and doesn't want; I respect that."
- People made their own decisions and choices. The person who used the service said, "All my care is directed by me and what is in my plan."
- People had their needs assessed before they started with the service. The assessment formed the basis of their care plan.
- People received care managed and delivered within lawful guidance and standards. However, the provider did not have a policy on the MCA. The registered manager rectified this during the inspection.

Staff support: induction, training, skills and experience

- Staff had the training, experience and knowledge to effectively carry out their roles. They spoke highly of their training and induction. They confirmed they had annual updates to ensure they remained up to date. Staff told us they felt confident after completion of training.
- Staff said they received the support they needed. They had regular contact with the registered manager. Formal supervision meetings had not taken place for the staff currently supporting the person who used the service. The registered manager had these planned.
- The provider had procedures in place to ensure annual staff appraisals.

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

- At the time of the inspection, the provider did not support anyone to meet their nutritional needs. However, staff training included food hygiene and nutrition and diet.

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

- Staff monitored people's health and told us they would report any concerns, such as decline in health or well-being. They could support people to attend health appointments if required.
- Staff received first aid training to enable them to respond to emergencies

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.

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 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 received the care and support they needed from caring, kind staff. The person who used the service said they found all staff they currently worked with to be friendly and polite. They said, "I get on and have gelled with them all."
- Staff received training in equality and diversity and initial assessments identified people's cultural needs such as their religion.
- The provider gained feedback on the service through questionnaires. These showed positive feedback about the staff. Comments included; 'Very pleasant' and '[Staff member] is really good.'

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

- The person who used the service felt included in planning their care and support. They said, "We have developed the care plan with me, my personal assistant and [name of registered manager] has been given a copy."
- Staff described how they ensured the person made their own decisions. One member of staff said, "[Name of person] tells you what they want and what is important to them."
- Staff had a good awareness of the individual needs and preferences of the person they supported. It was clear they had developed a positive relationship with the person. They spoke with warmth and kindness about the person.

Respecting and promoting people's privacy, dignity and independence

- The person who used the service told us staff were respectful of their privacy and dignity. They said staff supported them to be as independent as possible.
- Staff knew the importance of protecting people's dignity and promoting independence. Staff described how they did this to the satisfaction of the person who used the service.
- People received care for in line with their preferences. Staff knew how the person wanted their care delivered and what they could do for themselves.

Is the service responsive?

Our findings

Responsive – this means we looked for evidence that the service met people's needs.

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. 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; End of life care and support

- The registered manager assessed people's care needs and developed care plans from this information. These provided some details on the person, their history, likes, dislikes and needs.
- However, care plans available at the time of inspection, did not include the full detail of what the person's care needs were. We raised this with the registered manager to ensure they addressed this.
- Staff understood and described the person's care needs and preferences. The registered manager planned rotas flexibly to accommodate this.
- The provider had effective systems of communication in place to respond to any changes to people's needs promptly.
- The service was not supporting anyone at the end of their life. Staff received training in death, dying and bereavement to prepare them to deliver end of life care.

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 service could ensure alternative formats of information were available if needed. For example, large print. The registered manager knew how to access translation services.

Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities that are socially and culturally relevant to them

- Staff understood the person they supported needs to prevent isolation. Staff supported the person to pursue their interests and hobbies.
- The person who used the service was satisfied with the support they received with activities. They said, "They come in, see what's on the calendar and off we go. We have nice times. "

Improving care quality in response to complaints or concerns

- The person who used the service knew how to raise any concerns and felt confident to do so.
- The provider had a complaints policy in place. This included information about how to make a complaint and what people could expect to happen if they raised a concern.
- The complaints policy also included information on how to escalate complaints if people were not satisfied with the provider's response. The policy did not include contact details for these alternative organisations. The registered manager agreed to add these.

- The service had not received any complaints since our last inspection visit.

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

- Some records within the service were not fully up to date. These included risk assessments and some policies and procedures. The registered manager promptly updated these during the inspection.
- The registered manager and office manager demonstrated a commitment to ensuring a quality service that was safe. People who used the service completed regular questionnaires to give their feedback on the service. These showed a high degree of satisfaction with the service. No-one had made any suggestions for changes.
- The office manager maintained checks on staff files to ensure training and recruitment records were up to date.
- Staff spoke about their work with enthusiasm. They told us how much they enjoyed their job. One member of staff said, "This is a very good agency. Good standards and [name of manager] makes sure everyone does a good job."

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people; 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 was approachable and committed to providing good quality care to people. They promoted a person-centred and positive culture. The person who used the service said they found the agency to be well managed. They said, "Well organised, stable staff team and a good office team."
- Staff felt well supported and said they could go to the registered manager with any queries or concerns they had. One staff member said "Very good support from [name of registered manager]. We have regular contact, I am very satisfied."
- The registered manager understood their responsibility to apologise to people and give feedback if things went wrong.

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

- The provider encouraged people to be involved in planning their care and support.
- Staff enjoyed working for the service and would recommend it to others. They felt supported and valued.

Working in partnership with others

- The service worked in partnership with other agencies, such as social workers and personal assistants.

