

G P Homecare Limited

Radis Community Care (Strawberry Gardens)

Inspection report

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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

Radis Community Care is an extra care housing scheme based in Strawberry Gardens. People using the service lived in individual flats within the complex. At the time of the inspection 35 people were receiving a service of personal care. Not everyone who used the service was receiving 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

People told us they got their medicines when required however not all records confirmed people had received their medicines when required. People were supported by enough staff although the service had vacancies at the time of the inspection. The registered manager had an action plan in place that identified areas for improvement.

People felt supported by staff who were kind and caring and who had received supervision and checks prior to commencing employment at the service. One member of staff during the inspection was not adhering to the provider dress code policy. We fed this back to the registered manager to address. Staff felt well supported and able to raise any concerns with the registered manager should they arise. Staff respected people's dignity and choice and they gave good examples of how they promoted this daily.

People were happy with their care and care plans contained important information such as people's likes and dislikes, personal histories such as occupations and their individual life story.

People felt able to raise a complaint should they be unsatisfied, and the provider had a complaints policy in place. People's views were sought, and we observed the registered manager being accessible and approachable to people during our inspection. People were supported by staff to access health and social care professionals if the need arose.

Rating at last inspection

This service was registered with us on 4 January 2021 and this is the first inspection.

Why we inspected

This is a planned inspection to check whether the provider was meeting legal requirements and regulations, and to provide a rating for the service.

Follow up

We will continue to monitor information we receive about the service, which will help inform when we next inspect.

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

Radis Community Care (Strawberry Gardens)

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 one inspector and one Expert by Experience who made calls to people and their relatives. 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

Radis Community Care provides care and support to people living in extra care housing accommodation at Strawberry Gardens. Extra care housing is purpose-built or adapted single household accommodation in a shared site or building. The accommodation is bought or 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.

Registered Manager

This service is required to have a registered manager. A registered manager is a person who has registered with the Care Quality Commission to manage the service. 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.

At the time of our inspection there was a registered manager in post.

Notice of inspection

This inspection was announced.

We gave the service 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 19 April 2022 and ended on the 5 May 2022. We visited the location's office on 5 May 2022.

What we did before the inspection

We reviewed information we had received about the service and we used the 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.

During the inspection

We spoke with the registered manager, the area manager, one support worker and two team leaders. The Expert by Experience contacted eight people and seven relatives to gain their views about the service.

We reviewed a range of records. This included two staff files in relation to recruitment and two staff files in relation to supervision and competency checks. We looked at four care plans including their support plans and risk assessments and two people's medicines records. We also reviewed policies and procedures, incident and accidents, safeguarding records, complaints, action plans and customer satisfaction surveys.

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 of this newly registered service. This key question has been rated good.

This meant people were safe and protected from avoidable harm.

Using medicines safely

- People confirmed they received their medicines when required however not all records were accurate and up to date confirming medicines had been administered as required. We raised this with the area manager and registered manager who confirmed they had identified the issue and were in the process of addressing through the provider's quality assurance process and action plan.
- People were supported by staff who had their competency checked in the safe administration of medicines. The registered manager identified staff who required refresher training in the safe administration of medicines. This was confirmed at the inspection.
- People who required topical medicines, such as creams or lotions, had guidelines in place for staff to follow.

Systems and processes to safeguard people from the risk of abuse

- People were supported by staff who had received safeguarding training.
- Staff felt people were safe and staff had a good understanding of the different type of abuse and who they should go to. One member of staff told us, "I'd go to (the team leaders or registered manager). People are safe and supported. (Abuse is) physical, emotional, financial. I'd contact the police, social services or whistle blow if I need to".
- People felt safe. One person told us, "I feel very safe". Another person told us, "Oh yes. I am absolutely safe with the carers".

Assessing risk, safety monitoring and management

- People's care plans were current and up to date. Where risks had been identified there was an up to date risk assessment giving staff comprehensive information relating to how the person should be supported, for example with their moving and handling needs.
- People's care plans had important information relating to any environmental risks such as pets and what support the person might require in case of an emergency.
- Staff we spoke with had a good understanding of how to support people with their individual needs, including any risks.

Staffing and recruitment

- People were supported by enough staff however the service had experienced a difficult time due to some support worker vacancies. The area manager and registered manager were working hard to recruit to these vacant posts. At the time of the inspection the service was using staff from across the provider's other

services as well as agency staff. The permanent staff at Strawberry Gardens were also undertaking additional shifts to support at this time. One person told us, "I know them so well. They are on time and stay for the allocated timeslot". Another person confirmed at times staffing could be variable and this did affect how they started their day. They told us, "Sometimes the timing is a bit hit and miss as they are short staffed, and it can be annoying if they are later than my scheduled time as I need to start my day".

- Staff supported each other by picking up additional shifts and all felt supported by the management team. One member of staff told us, "Staff are wonderful. We have used agency the area manager and registered manager are aware. We work together". Another member of staff told us, "We could do with more staff, I cover what I can. There are more staff coming". The registered manager confirmed recruitment was a priority for the service at this time. This was confirmed by the provider's action plan.
- People were supported by staff who had checks completed to ensure they were suitable to work with vulnerable adults. This included a full Disclosure and Barring Service check (DBS), references and an interview.

Preventing and controlling infection

- People were supported by staff who knew how to use personal protective equipment safely however not all staff were adhering to the provider's dress code. For example, during our inspection we observed one member of staff have painted nails. The provider's infection prevention and control policy confirmed this was not acceptable. We raised this with the registered manager following our inspection so they could address this practice.
- Staff had a good understanding of how to safely use personal protective equipment.

Learning lessons when things go wrong

- People's care plans contained important information relating to incidents and accidents.
- Staff completed incident and accident logs including any actions taken. The registered manager monitored all incidents and accidents so actions, or improvements could be made. Records confirmed this.

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 were supported by staff who had a good understanding of equality and diversity including the protected characteristics under the Equality Act 2010. One member of staff told us when asked what the protected characteristics were, "Religion, race, disability, sexuality". Another member of staff told us, "One person might wish to attend a church service, someone else might not. Protected characteristics are religion, sexuality, race, sexual orientation, disability, age".
- People's care plans contained important information relating to if the person wore glasses and required hearing aids or any differing communication methods or needs.
- Staff knew people well including how they might need to adapt their communication needs. They were aware at times when one person might be better understood if they wrote what they were trying to say down. Staff felt this was important as it would ensure there was no misunderstanding.

Staff support: induction, training, skills and experience

- People were supported by staff who felt well supported by the registered manager.
- Staff received an induction and an orientation prior to working in the service.
- A daily handover was provided to staff and agency workers to ensure they were familiar with the service and people's individual needs.
- Staff received training to ensure they had the skills and knowledge to support people in their care. Training included, infection control, moving and handling, mental capacity and equality and diversity.
- All staff were due an annual appraisal at the time of the inspection. The registered manager confirmed this was a priority for them. Staff were receiving supervisions, and all felt able to discuss any problems with the registered manager should the need arise.
- Staff were supported to complete the Care Certificate which is an agreed set of standards that define the knowledge, skills and behaviours expected of specific job roles in the health and social care sectors.

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

- People were supported by staff to either have their meals in their own flats or on site within the bistro. One person told us, "They give me choices of food and drink and leave drinks for me when they leave". One relative told us, "They provide (name) with food and drinks and always give (name) choices".
- People's care plans contained important information relating to their individual dietary requirements and their likes and dislikes.

Staff working with other agencies to provide consistent, effective, timely care; Supporting people to live

healthier lives, access healthcare services and support

- People had referrals made to health care professionals such as occupational therapists and doctors.
- People were supported by staff who sought medical attention for them when required. One member of staff explained it was people's choice but that they sought their consent prior to calling for assistance. They told us, "The choice is their's. We check if they would like us to call their family or to see a doctor". One relative told us, "They will ring the pharmacy for (name's) prescriptions and then they are delivered".
- People's care plans contained important information relating to any medical conditions and if the person required support from staff.

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 MCA 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's care plans contained important information such as if the person had capacity and if there was lasting power of attorney in place.

- Staff confirmed they always give people choice. One member of staff told us, "We ask them".
- Care plans contained people's wishes relating to their care needs and choices and who to contact should decisions about care and treatment need to be made.
- Staff had received training in mental capacity.

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

- People felt supported by staff who treated them well. One person told us, "They are very good". Another person told us, "They are very chatty and kind".
- One relative told us, "The care is very good and (name) is well looked after". Another relative told us, "(Name) had been using the service for over a year, it is excellent".
- People and relatives felt staff were kind and caring. One person told us, "They do everything that is required so I am quite happy with my care package". Another person told us, "I am quite happy as the staff are smashing". Another person told us, "They are very genuine people and so nice. I feel very happy with them". One relative told us, "(Name) is very well groomed and (name) hair and nails always look nice". Another relative told us, "The carers are very kind".
- We observed during our inspection the registered manager and staff speak with people in a respectful and kind manner. This was during phone calls and when people came to the office.

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

- People were supported by staff who encouraged people to make decisions about their care and support. Staff gave examples of how they promoted people's choice and control and care plans were written in a person-centred way, prompting and celebrating what the persons individual's views and wishes were in relation to their care needs. One person told us, "They give me choices of food and drink and leave drinks for me when they leave". Another person told us, "They ask me what I would like to wear and what I would like to eat". One relative told us, "They do very well by (name) and have her best interests at heart".

Respecting and promoting people's privacy, dignity and independence

- People were supported by staff who promoted people's independence, dignity and privacy. Staff told us, "We promote independence". Another member of staff told us, "We promote independence, prompting people to do things they can still do. Like use a flannel to wash their face". They also confirmed shutting people's doors and using towels gave people privacy and dignity during personal care. They told us, "We use towels to cover areas we're not washing at the time. We also draw curtains and pull the door too".
- People felt respected and supported by staff with their independence. One person told us, "They cover me with towels, they are very respectful to me". They went on to say, "I like to be independent, but they really help me out and are very chatty. I enjoy our conversations". Another person told us, "I do all my food and drink and take my own medicines. They will stay with me until I have a shower to make sure I don't fall, and they help me get dressed and they give me a lot of privacy". Another person told us, "The carers are helping

me to stay independent. It's an excellent service".

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 plans were person centred and contained important information such as life histories, people's like and dislikes and details of people's daily routines.
- People were involved in their care planning and reviews were undertaken regularly and if people's needs changed.
- Various social events were available to people living within Strawberry Gardens. People could use the inside and outside communal areas should they wish to entertain guests outside of their flat.

Improving care quality in response to complaints or concerns

- The provider had a complaints policy and people felt able to raise concerns should they be unhappy. One person told us, "They always get things right". Another person told us, "The company and staff are very approachable. I can discuss anything with them". Another person told us "I have no complaints and if I did, I know who to speak to".
- All relatives apart from one were happy. One relative told us, "We have no issues (name) is looked after very well, excellent service". Another relative said, "They are great, and I have no complaints". Another relative said, "The care is very good overall". One relative we spoke with wasn't happy with their loved one's care and support. We shared this information back to the registered manager so they could address this directly.

Meeting people's communication needs

Since 2016 all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard. The Accessible Information Standard tells organisations what they have to do to help ensure people with a disability or sensory loss, and in some circumstances, their carers, get information in a way they can understand it. It also says that people should get the support they need in relation to communication.

- At the time of the inspecting no-one was requiring information in line with the Assessible Information Standard (AIS).
- Staff were aware people might require information in a different way and they gave example that they might have to write information down.

End of life care and support

- People's care plans contained information relating to diagnosis or health conditions. No-one at the time of the inspection was receiving end of life care.

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; 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 the area manager had a good understanding of their role and responsibility under the duty of candour. They were open and transparent about improvements required which was supported by an ongoing action plan.
- Staff felt supported and were happy in the team. One member of staff told us, "Support is everything we could need". Another member of staff told us, "I can go to them (management), if I need them". Another member of staff told us, "Staff are wonderful. I'm fully supported".
- The registered manager was passionate in providing good quality care and they told us how hard staff had worked during the pandemic. They told us, "They've worked really hard through COVID-19. They're a good team".
- The provider had a set of values which staff were expected to role model. These included, 'professionalism, ownership, social responsibility, integrity, teamwork, innovation, valuing people, excellence'. These values were integral to the provider's vision of, 'Making positive differences to people's lives through outstanding community care'.

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

- The registered manager monitored incidents and accidents, medicines records, complaints and safeguarding. They had an action plan in place that identified shortfalls such as recruitment of staff and undertaking annual appraisals for staff.
- The area manager confirmed they were due to implement a new provider's assurance system in the next few months.
- Staff felt well supported and it was a nice place to work. One member of staff told us, "There is an open-door policy, they've always been there with supporting me".
- Staff attended a handover before the start of their shift. Handovers were an opportunity to discuss any changes to people's health or care and support.

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

- People's views and experience had also been sought about the care they had received at Strawberry

Gardens. A survey undertaken in September 2021 confirmed people were either satisfied or very satisfied with the staff at Strawberry Gardens. Some areas for improvement were on people's care experience where two people felt this could be improved on. Comments included, 'More care staff at all times', 'weekend care not always successful when you have to use agency staff' and 'meals being delivered cold'. The registered manager confirmed some improvements had been made for example food was now being delivered on different plates, so food remained hot for longer. They had an action plan to address the recruitment of more staff.

- People and relatives felt able to raise issues with the registered manager if needed.

Continuous learning and improving care; Working in partnership with others

- The registered manager had a positive working relationship with the local community.
- The registered manager liaised with the local authorities, district nurses, GP practices and safeguarding teams when required.
- The area manager held weekly support meetings with the registered manager, and they confirmed daily support was available if or when required.
- The registered manager confirmed two visits had been undertaken by the local authority contracts and compliance officer. Areas identified for improvement had been actioned and the registered manager confirmed they were undertaking ongoing monitoring of training, service user satisfaction and call bell use.