

Rainbow Care Solutions Limited

Rainbow Care Solutions (Merseyside)

Inspection report

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Date of inspection visit:
22 November 2023
28 November 2023
08 January 2024

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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

About the service

Rainbow Care Solutions (Merseyside) provides care and support to people in their own homes across the St. Helens area. 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. At the time of the inspection there were 32 people were being supported with personal care.

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

Systems were in place to minimise the risk of harm to people. Procedures were available to staff for use in the event of a concern being raised. People told us they felt safe when their care and support was delivered.

People were supported by care staff who had been safely recruited and there were enough staff employed to meet people's needs.

Known risks to people were reviewed, assessed and wherever possible, mitigated. The service worked with other agencies and healthcare professionals to support people with their safety and health.

People told us that staff delivering their care and support were respectful, caring and kind.

People were supported to express their views about the service. The provider was aware of their legal obligations. The service was in the process of introducing a new improved electronic management system. People and their family members had access to their records and care planning information on-line.

Rating at last inspection

The last rating for this service was good (published 16 May 2023).

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Why we inspected

This inspection was prompted by a review of the information we held about this service.

For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating.

The overall rating for the service is good based on the findings of this inspection.

You can read the report from our last comprehensive inspection, by selecting the 'All inspection reports and timeline' link for Rainbow Care Solutions (Merseyside) on our website at www.cqc.org.uk.

Follow up

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

inspect.

The five questions we ask about services and what we found

We always ask the following five questions of services.

<p>Is the service safe?</p> <p>The service was safe. Details are in our safe section below.</p>	<p>Good ●</p>
<p>Is the service well-led?</p> <p>The service was well-led. Details are in our well-led section below.</p>	<p>Good ●</p>

Rainbow Care Solutions (Merseyside)

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

This inspection was carried out by 1 inspector.

Service and service type

This service is a domiciliary care agency. It provides personal care to people living in their own houses and flats.

Registered Manager

This provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations.

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

Notice of inspection

This inspection was unannounced.

Inspection activity started on 22 November 2023 and ended on 8 January 2024. We visited the location's office/service on 22 and 28 November 2023.

What we did before the inspection

The provider was not asked to complete a Provider Information Return (PIR) prior to this inspection. A PIR is information providers send us to give some key information about the service, what the service does well and improvements they plan to make. 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 all this information to plan our inspection.

During the inspection

We spoke with 3 people who used the service and 3 family members/carers of people who used the service. We spoke with 5 staff members including the registered manager. We reviewed a range of records, including care records, policies and procedures. We looked 4 staff files in relation to recruitment, training and records relating to the management of 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 our last inspection we rated this key question good. The rating for this key question has remained good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People told us they felt safe using the service.
- Safeguarding procedures were in place and staff had access to information about how to protect people from harm.
- Staff received training in safeguarding people.

Assessing risk, safety monitoring and management

- Systems were in place to identify, monitor and where possible, mitigate identified risks to people.
- One person described how staff work alongside other agencies to ensure their safety. They told us "Staff worked with the Occupational Therapist to do moving and handling assessment." A family member told us, "All risk assessments carried out, very thorough."
- Policies, procedures and guidance were available to staff in relation to health, safety and risk. Further information about safe working practices was also available in the staff handbook.
- The management team reviewed health and safety as part of their monitoring of service delivery.

Staffing and recruitment

- Sufficient numbers of staff were available to meet the needs of people.
- Recruitment procedures were in place which included appropriate checks being carried out prior to staff commencing their employment.
- The registered manager showed an understanding of their role and commitment when recruiting staff from outside of the United Kingdom.
- People spoke positively about support they received from the staff team. Their comments included "They turn up on time, spot on, fully understand my needs. Staff listen to me"; "They are very good. They do what I want. They are very kind" and "Carers enable me to have a happy life. They enable me to live a life."
- Family members comments included, "When with (Relative) staff are respectful. There have been some staff changes and the newer staff not as chatty and more self-conscious. They are always very much on time" and, "Staff are very good. All the carers are kind and caring. Some are a more experienced than others. Accommodating when need to move the times due to hospital appointments."

Using medicines safely

- Systems for supporting people with their medicines were in place.
- Policies and procedures were in place for the safe administration of people's medicines.
- Staff had received medicines training for their role.

Preventing and controlling infection

- Procedures were in place for the prevention of infection prevention and control.
- Staff had access to personal protective equipment (PPE) for use when required.
- People told us "PPE worn when required" and, Staff always clean up after themselves."
- Staff had received training in infection prevention and control.

Learning lessons when things go wrong

- When things went wrong for people, systems were in place to monitor and make improvement to minimise the risk of re-occurrence.
- Detailed records were maintained of all incidents which were regularly received.

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 our last inspection we rated this key question good. The rating for this key question has remained 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

- Systems had been developed to promote positive, person-centred care for people.
- At the time of this inspection, the service was in the process of transitioning from one electronic recording and monitoring system to another. The new system would allow all of the scheduling and records to be within one system. Discussion took place around this being an opportunity to carry out full reviews of people's needs and wishes during the transition. Staff showed that this was in progress.
- Systems were in place for the monitoring and oversight of the service. For example, regular checks were maintained of rotas; complaints; incidents and accidents and peoples planned individual needs.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; 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 other managers within the service had a clear understanding of the role and responsibilities.
- The registered manager understood their responsibility in relation to the duty of candour and the need to report certain incidents to CQC.

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

- The management and office based staff engaged with people using the service and their families on a regular basis. During both visits to the office, we saw staff taking calls from people using the service as well as making calls on behalf of people to other agencies, for example the local authority.
- To promote social inclusion, the service had arranged a party at a local venue for people using the service and their family members/carers which was enjoyed by all.
- People told us that they felt involved in the management of their care and that they could contact the service at any time to discuss any changes to their needs and wishes.
- Comments from family members included, "If there is a concern re health, welfare or anything they always get in touch. If need be they would liaise with the community matron, frailty team and GP" and, "Staff interact with all the family, children and pets." Another family member told us that they were able to monitor their relatives care and support as they had full access to information electronically.

Continuous learning and improving care; Working in partnership with others

- The management team worked with other agencies when needed to maintain people's health and wellbeing.
- The service was working with the local authority to continually develop the service they delivered.