

Roman Caring Services Limited

# Roman Caring Services Limited

## 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

Roman Caring Services Limited is a domiciliary care agency that was providing support to five people at the time of the inspection.

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

We identified some inconsistencies and gaps in some records. The provider had an action plan in place to address these issues.

We made a recommendation about the quality assurance of records.

The provider completed regular quality checks and where actions were identified these were addressed to bring about improvements.

People felt the care they received was safe. Sufficient numbers of staff were employed to meet people's needs and provide safe care. Risks to people had been assessed and action taken to mitigate them. Staff administered medicines to people on time and records were maintained. Staff had sufficient supplies of personal protective equipment (PPE) and people confirmed staff wore face masks at all times.

People's needs had been assessed and planned in consultation with people and their relatives. Staff received training to carry out the care and support people needed and felt supported in their role.

People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible and in their best interests; the policies and systems in the service supported this practice.

People were supported by regular staff who people and their relatives were happy with. Their comments included, "They are confident and have lots of common sense; makes life easier." "They are helpful. They have never not turned up" and "They have caring staff and I have a good repartee with them."

The provider contacted people regularly to review their care and to ensure they were happy with the support they received. People knew who to contact if they had any concerns and felt confident any complaints would be taken seriously. One person told us, "I've got a phone number, I would ring that number if I had any concerns. I'm sure they would deal with any complaints."

People and their relatives felt the service was well run and the provider was open and transparent. Staff told

us they enjoyed working for 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

This service was registered with us on 24 May 2019 and this is the first inspection.

#### Why we inspected

This was a planned inspection based on the date the service was registered.

#### 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.

# Roman Caring Services 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

The inspection was completed by one 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.

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

This inspection was announced.

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 the provider or registered manager would be in the office to support the inspection.

Inspection activity started on 3 December 2020 and ended on 7 December 2020. We visited the office location on 3 December 2020.

#### What we did before the inspection

We reviewed information we had received about the service since the service was registered. We used all of 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 and the relatives of three other people about their experience of the care provided. We spoke with seven members of staff including the nominated individual, the care co-ordinator, the registered manager and care workers. The nominated individual is responsible for supervising the management of the service on behalf of the provider.

We reviewed a range of records. This included four people's care records and three people's medication records. We looked at two staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service were also reviewed.

#### After the inspection

We continued to seek clarification from the provider and reviewed a range of records including care plans, risk assessments and staff duty rotas.

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

### Preventing and controlling infection

- Staff were aware of the requirements of which protective equipment (PPE) to wear.
- Sufficient stocks of PPE were available to staff.
- People told us that staff always wore PPE when they visited them. One person's relative told us, "They wear masks all the time and have gloves and aprons."

### Assessing risk, safety monitoring and management

- Risk assessments were completed and actions to reduce any identified risks recorded.
- Staff were given time to travel to each person. This meant that staff arrived at the expected time and staff were able to support people with all the care and support they needed.

### Systems and processes to safeguard people from the risk of abuse

- The provider had effective safeguarding systems in place.
- Staff understood their safeguarding responsibilities and said they would have no issue in reporting concerns to managers.
- People said they felt safe with the care and support they received.

### Staffing and recruitment

- Staff had been recruited safely to ensure they were suitable to work with vulnerable people.
- There were enough staff to support people's needs to ensure they received the support at a time when they needed it. Everyone we spoke with told us staff usually turned up on time. One person commented "They usually turn up on time or let us know if they are running late."
- A relative wrote to the provider and stated, 'We were worried at start of COVID-19 that care may stop but the girls are reliable punctual and caring'.

### Using medicines safely

- People's medicines support needs were assessed and recorded within their care records.
- Staff were trained in medicine administration.
- Staff completed medication administration records to indicate when they had administered people's medication.

### Learning lessons when things go wrong

- The service managed safety incidents well.
- Accidents and incidents were reviewed by management and analysed. This meant that any themes and trends could be identified to prevent further occurrence and improve service provision.

# 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's needs were assessed before they started to use the service to ensure care plans reflected the support required. One person told us, "They came out to see me. I had an assessment at home."
- Care and support were planned, delivered and monitored in line with people's individual assessed needs.

Staff support: induction, training, skills and experience

- Staff received appropriate training. Spot checks were carried out to ensure staff supported people safely and were meeting their assessed needs.
- New staff were supported to undertake an induction.
- The service provided an out of hours on-call service for staff in case of an emergency. Managers communicated with the staff and people who used the service, so they were kept up to date about any changes.
- Staff told us they felt well supported.

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

- People's nutritional needs were met.
- People's preferences were recorded in care records.

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

- Assessments were reviewed to help ensure any changes in people's needs were identified and plans changed to make sure they received the appropriate care and support.
- The service worked with social care, healthcare and other professional bodies to provide support to meet people's needs.

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 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.

- People had signed documents giving their consent to receive the care and support needed. A written record was kept in people's individual care records.
- Where people had appointed a power of attorney, evidence of this had been obtained and detailed within their care records.
- People's care records detailed that staff had gained consent from people before providing support on each occasion.

# 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.

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

- People were involved in planning their care and support and their choices were recorded.
- Regular contact was made with people and family members to discuss their support and obtain people's views. One person told us, "They care about you. I feel valued. They are very nice. You have got a voice, they listen."

Respecting and promoting people's privacy, dignity and independence; Ensuring people are well treated and supported; respecting equality and diversity

- Staff treated people with kindness and compassion. Positive and caring relationships had been developed between people and staff. A compliment received from a relative who wrote to the provider stated, 'Say a huge thankyou to you and team for looking after my relatives so beautifully in the current climate (COVID-19). It's a huge weight of our minds knowing they've got such kind souls looking after and caring for them'.
- Staff clearly knew people very well and were able to tell us about individuals and their lives and families. This enabled them to engage well with people. One person's relative commented, "My relative really likes them, they are cheerful. They walk in usually two of them and see my relative sitting on the settee and say, 'Hi, how are you?'. It puts a smile on my relatives' face which is nice. Really friendly."
- People and family members spoke positively about the staff who visited them. When asked if they were happy with the staff that supported their loved one, a relative commented, "Happy with them? Yes, indeed we are. We look forward to them coming."
- People were positive about the staff and how they respected their privacy and dignity.

# 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 received support that was person centred and met their assessed needs. One person told us, "I'm delighted with them, thrilled really, very nice women, very considerate don't dictate to you, they try to help and accommodate you."
- Care plans contained information regarding people's social history, likes and dislikes and interests to allow staff to get to know people. A staff member told us, "There are care plans to follow for every client we go to. When we have a new client, the care plan will already be there, it tells you what need to know."
- People were supported by staff that were familiar to them. One person's relative told us, "It's usually the same one's we see". A staff member commented "I see the people every week and have the same rota the same every week."

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.

- People's communication needs were assessed before they started using the service.
- The management team told us they would make information available to people in formats that suited them if needed.

Improving care quality in response to complaints or concerns

- There was a complaints policy in place which outlined how complaints would be responded to and the time scales.
- People said they knew how to make a complaint if they were unhappy. One person told us, "I know who to call if I did have a problem but if I mention anything, they are open to anything and listen."
- Complaints received had been responded to and investigated appropriately.

# 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.

Continuous learning and improving care;

- It is recognised that the service was impacted by the COVID-19 pandemic and records had been checked and reviewed. However, although we found no evidence of harm to people, checks that had taken place had not always identified shortfalls and inconsistencies in the records. The nominated individual had an action plan in place to address these issues which included the introduction of formal audit tools.

We recommend that the provider seeks guidance from a reputable source on the quality assurance of records and updates their practice accordingly.

- When gaps in records had been identified action had been taken to address them. A staff member commented "Team leaders collect the records (from people's houses). I've not had any gaps but others have and the team leaders pick that up."
- People had completed 'Quality review' questionnaires, the response to which had been overwhelmingly positive, with no negative comments or suggestions for improvement.

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

- There was a clear management structure in place to support people and staff. The nominated individual had oversight of the day to day running of the service with support from a co-ordinator both of whom demonstrated a good understanding of people's needs.
- The registered manager did not have an active role in the day to day running of the service. They explained they had worked from home throughout most of the COVID-19 pandemic and had been working on the future development of the service.
- Policies and procedures were in place and provided guidance to staff however some needed updating to reflect current national guidance.
- The nominated individual notified CQC of specific events as required as well as complying with duty of candour responsibilities.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Working in partnership with others

- People's opinion of the service was sought. Any negative feedback or issues were looked into and addressed without delay. One person told us, "This agency is very open, not stuffy about anything, very open

and want to sort it out if there is any little niggle. There was one issue I called up about her once and they sorted it out straight away."

- People and staff felt communication and support they received from the nominated individual and co-ordinator was good. One person commented "I know the managers (nominated individual and co-ordinator) well, they periodically do a call with me."
- The nominated individual, co-ordinator and team leaders worked closely with people and their relatives to ensure that the support provided continued to meet people's needs.

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

- People received their support to meet their needs at a time which suited them.
- Staff told us they enjoyed working for the service. They spoke of a positive team morale and good support from the nominated individual and co-ordinator.