

Reed Specialist Recruitment Limited

# Reed Specialist Recruitment Ltd - Reed Community Care - Cambridge

## 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

Reed Specialist Recruitment Ltd - Reed Community Care – Cambridge, is a domiciliary care agency providing personal care to 11 people in their own homes 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

The service worked in partnership with children, families and other professionals to achieve individualised, person-centred care. Feedback about the care and support provided to people was overall complimentary. One relative told us, "I think the best part of the service is the management because they have a strong recruitment side. They are very professional. They are very positive and well organised.

People were supported by a staff team who were safely recruited, trained and supported in their role. Staff spoke positively about the leadership and management of the service.

Systems were in place for the safe management of medicines.

Staff received appropriate induction and training to equip them to support people well. The registered manager carried out an assessment of needs before people started using the service. 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 and their relatives told us they felt cared for by staff who treated them with respect and dignity. People were encouraged to maintain their independence and make their own choices about their lives.

Effective systems were in place to monitor and review outcomes for people. The provider had a complaints policy in place which was provided to people and relatives before care visits began.

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 and update

This service was registered with us on 11 September 2020 and this is the first inspection.

### Why we inspected

This service had not previously been inspected and we wanted to check that people were receiving safe care and support.

### Follow up

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

This was an 'inspection using remote technology'. This means we did not visit the office location and instead used technology such as electronic file sharing to gather information, and video and phone calls to engage with people using the service as part of this performance review and assessment.

## 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.

# Reed Specialist Recruitment Ltd - Reed Community Care - Cambridge

## **Detailed findings**

## Background to this inspection

We carried out this performance review and assessment under Section 46 of the Health and Social Care Act 2008 (the Act). We checked whether the provider was meeting the legal requirements of the regulations associated with the Act and looked at the quality of the service to provide a rating.

Unlike our standard approach to assessing performance, we did not physically visit the office of the location. This is a new approach we have introduced to reviewing and assessing performance of some care at home providers. Instead of visiting the office location we use technology such as electronic file sharing and video or phone calls to engage with people using the service and staff.

### Inspection team

The inspection was carried out by one 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 homes.

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

We gave a short period of notice of the inspection. This was because it is a small service and we needed to be sure that the registered manager would be able to support the inspection and provide us with information we requested.

What we did before the inspection

We reviewed information we had received about the service. We sought feedback from the local authority and professionals who work with the service.

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 used all of this information to plan our inspection.

During the inspection-

This performance review and assessment was carried out without a visit to the location's office. We used technology such as telephone calls to enable us to engage with people using the service and staff, and electronic file sharing to enable us to review documentation. Inspection activity started on 22 March 2022 and ended on 6 April 2022.

Due to people's complex care and support we spoke with eight relatives about their experience of the care provided to their family members. We spoke with the four members of staff currently providing care, and the registered manager.

We reviewed a range of records. This included the persons care records. We looked at files in relation to recruitment and training. A variety of records relating to the management of the service, including policies and procedures were reviewed.

# 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. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- Staff had received safeguarding training. This included how to protect children, young people and their families from abuse and potential harm. The service worked well with other agencies to ensure people's safety.
- Relatives told us they were assured their family member was safe with the support they received from staff. A relative commented, "I think [family member] is safe, yes." Another relative commented "Yes. [Family member] is definitely safe."

Assessing risk, safety monitoring and management

- People had individual risk assessments in place to guide staff. These included both environmental risk factors and individual health risk assessments.
- Staff providing the care confirmed they had time prior to delivering care to read and understand the person's care plan and risk assessments. They told us, "The office staff are very good at making sure we are aware of any changes to a person's care and support." Records were reviewed regularly and updated if changes to the persons needs occurred.

Staffing and recruitment

- The provider had a recruitment process which ensured staff were suitable to work for the service. Records showed, the process had involved a Disclosure and Barring Service (DBS) record check and previous employment checks.
- Some relatives raised with us that there has been at times no staff available, but they have received communication from the office staff. Families on these occasions have provided the extra support. The registered manager told us there has been times they have been short staffed, and they have an ongoing recruitment process in place. This is to employ additional staff to be able to take on additional packages of care and cover holidays and sickness.

Using medicines safely

- People's care plans guided staff in the level of help people needed to take their medicines. A number of people only required a prompt and staff to observe them taking their own medicines.
- Records showed, and staff confirmed they had received training in medicine administration and had received a spot check from the registered manager to ensure safe practice.
- A family were very complimentary about a person's medication procedure. They told us, "One of the managers has arranged for [family members] medicines to be delivered. This has worked really well."

Preventing and controlling infection

- The registered manager had up to date policies and procedures in place to safeguard people and staff and reduce the risk of transmission of infection.
- The service had a plentiful supply of personal protective equipment (PPE) to prevent the spread of infection. Relatives had mixed comments on what PPE wore when providing care and support in people's homes. The registered manager confirmed they will address this with staff in light of new guidance being issued recently.

#### Learning lessons when things go wrong

- At the time of our inspection there had been no concerns or complaints raised, or incidents in the time since the service opened. The registered manager did have processes in place which would monitor trends and themes if anything arose.



# 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

- The registered manager met with people new to the service to assess their needs and agree the support the service could offer. Relatives confirmed that the care and support to be provided was agreed and in place before the care visits began.
- Care plans contained information about people's diverse needs and included any preferences in relation to culture, religion and diet.

Staff support: induction, training, skills and experience

- Staff confirmed they had received induction training when they first started working for the service. Staff received the training and support needed to ensure they could deliver support safely. One member of staff said, "I have had all mandatory training, and undertook SCIP training (Strategies for Crisis Intervention and Prevention) this was very helpful in doing my job. Some training has been done remotely on zoom and some face to face."
- Staff received supervision and could also contact management for support in between these meetings. Staff received a yearly appraisal.

Staff working with other agencies to provide consistent, effective, timely care; Supporting people to live healthier lives, access healthcare services and support; Supporting people to eat and drink enough to maintain a balanced diet

- People had care plans in place which contained information regarding nutrition and fluid needs. This included relevant guidance if necessary, and people's personal preferences.
- Staff worked with guidance and information from external health and social care professionals including specialist healthcare services and GP's. This was to promote people's well-being and deliver effective care and support.

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.

- Staff knew how the MCA applied to their work. They understood the importance of giving people choice and respecting the choices which they made. This was also reflected in peoples care plans.

# 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 and relatives made positive comments about the staff and the service they received. A relative said, "The staff are definitely caring, very much so, I am not sure how else to describe them."
- People's care plans had enough guidance for staff to follow to ensure that people were well treated and supported. People's preferences and what was important to them was clearly documented in their care plan to ensure that staff understood what was important to them.
- People and relatives told us staff took the time to talk to them during their visits. One relative said, "The staff are all caring, one member of staff knows [person's name] well. They treat them with dignity and respect them."

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

- Relatives felt that they had been involved in making decisions about the care of their relative and they are given choices on what they would like to do on a day to day basis. One relative told us, "Staff give choices and will help them use Google search to give them ideas as to what they can do. The staff appear to have time for them, and don't rush off."

Respecting and promoting people's privacy, dignity and independence

- People were satisfied that staff respected their privacy and dignity. A relative told us "Staff ask [family member] for consent when supporting them with their care and support."
- The service kept people's information securely. One member of staff told us "There is lockable space to keep records in."

# 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

- The service was inclusive and took into consideration children, young people and their families' individual needs and preference and planned the care and support accordingly.
- Staff told us people's care plans contained information that was appropriate and accurate about their needs. One member of staff said, "The care records are very relevant and informative. They are updated regularly, and we are informed of any changes quickly. If I need more information or feel I am unsure I contact the office (staff) and they are always very helpful."
- The care records used language that valued and respected people. There were prompts for staff to seek consent. Where appropriate to encourage people to make choices and to support families to encourage their children to be as independent as possible.

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 registered manager was aware of their responsibilities under the AIS and told us that any information could be provided in other languages and or in alternative formats. They told us of times where pictures were used by staff to convey key information to children/adults to aid understanding.
- People's care records included information of how they communicated and guidance for staff on how to communicate with people effectively.

Improving care quality in response to complaints or concerns

- There was a complaints procedure in place. Relatives we spoke with had not had to make any formal complaints. One relative told us; "I have never made a formal complaint. I would speak with the management and have confidence they would sort it out." Another relative said, "We would email if we had a complaint. Communication with the staff and management is good."
- The registered manager logged any concerns that came in and these included actions they had taken in response to the issues raised.

# 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

- The registered manager was committed to developing a person-centred culture within the service. They understood their responsibilities to ensure people received the care they needed and was committed to providing a good service for people.
- Relatives appreciated that they had the same member of staff visit them. Although they told us this has not always been possible. The registered manager understood that this was important to them. One relative said, "The people who support [family member] are variable, some good, some not quite so good." Another relative told us, "The staff member is like a second mum to (family member). They really go over the top to help."
- Relatives overall spoke very positively about the registered manager and the care and support they provided. One relative said, "I think the management are very well organised. They definitely listen to what I have to say, and always come back to me to help." Another relative told us, "I think the management are very well organised. They definitely listen to what I have to say, and always come back to me to help."
- Relatives told us that they were confident with the service and the care provided, they had recommended the company to other people. One relative said, "The carers are so brilliant, I can't speak highly enough of them. I have recommended Reed to other 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; Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements;  
Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- The registered manager used information gathered from audits and feedback from families and stakeholders to develop the service and make improvements.
- People and their relatives were given the opportunity to provide feedback regularly to the registered manager. A survey is carried out twice a year and a report is written and action taken where necessary.
- The registered manager had good knowledge regarding their responsibility to report notifiable incidents or events to the Care Quality Commission and Local Authority.

Continuous learning and improving care; Working in partnership with others

- The management team shared with us the challenges of recruiting. They had recognised the need to keep up to date with the latest government guidance on COVID-19 and had adapted accordingly.

- Audits were used to identify areas of improvement and an action plan developed in response and updated where applicable.
- Spot checks on staff took place to monitor how staff were providing care, timeliness of calls and the approach to people and families.
- Staff and the management team worked closely with the relevant professionals involved in the people's lives,
- The registered manager worked in partnership with other professionals and agencies, such as health care professionals and the local authority to ensure that people received joined-up care.