

Retain Healthcare Ltd

Retain Healthcare Bristol

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?

Requires Improvement ●

Summary of findings

Overall summary

About the service

Retain Healthcare Bristol is a domiciliary care service that provides support to people in their own home. At the time of our inspection there were 13 people using the service.

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

People received their medicines safely although improvements were required to the recording of external medicines including creams and patches that were applied by staff. People's support plans contained important information relating to their life histories and medical conditions although some information such as where the person's gas and water supply safety valves was not always recorded within the designated section of their support plan.

People were supported by staff who received training and spot checks to monitor their practices. Staff felt supported and had supervisions, which were an opportunity to discuss and address any areas of improvement. People felt supported by staff who gave them choice and control. People were supported by enough staff and by staff who had checks prior to working with vulnerable adults.

Staff had a good understanding of the different types of abuse and who they should raise any concerns with. People were supported by staff to access health care professionals when required. Feedback from health and social care professionals confirmed the service worked in partnership with them and communication was now much improved with regular twice a week meetings being undertaken.

Quality assurance systems had not always identified shortfalls found during our inspection. For example, in relation to the recording of topical creams and pain patches on body maps and notifications submitted under the wrong service details. People had their views sought when office staff undertook a review of their care. Following the inspection the registered manager confirmed three people had completed a customer satisfaction survey. All three people were happy with their care.

Rating at last inspection

This service was registered with us on the 25 February 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?

Requires Improvement ●

The service was not always well-led.

Details are in our well-Led findings below.

Retain Healthcare Bristol

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

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

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 48 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 10 May 2022 and ended on the 25 May 2022. We visited the location's office on the 19 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. We used all this information to plan our inspection.

During the inspection

We spoke with the registered manager, the provider, the home care manager and one office member of staff and four care staff. The Expert by Experience contacted 13 people and managed to gain views about the service from 11 people. They also spoke with three relatives.

We reviewed a range of records. This included two staff files in relation to their supervision and appraisals and two new staff in relation to their induction and recruitment. We looked at three people's support plans and two people's medicines records. We also reviewed incidents and accidents, safeguarding records, notifications, complaints, provider customer satisfaction surveys, the staff handbook and 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.

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.

Assessing risk, safety monitoring and management

- People's support plans contained important information relating to their support including diabetes and any risks. However, some sections of people's support plan were left blank or had missing information. For example, two people's support plan had no information recorded relating to their religion. Some information such as people's gas, water and electric supplies had been recorded in the person's environmental risk assessment section and not within the support plan section for where 'services' could be located. This could mean staff might not be able to respond promptly due to information not being recorded within the persons support plan. We fed this back to the registered manager.
- People's support plan had important information such as what support they might require in case of an emergency evacuation from their property.
- Staff we spoke with had a good understanding of how they support people with their individual needs, including any risks. They told us, "We are always making sure people get good personal care, support with any pressure care and incontinence care".

Staffing and recruitment

- People were supported by enough staff although at times they felt staffing was inconsistent. One person told us, "Yes, enough carers. Different carers, I don't mind". Another person told us, "Can change from one day to the next. Sometimes regulars". Another person told us, "Yes, enough carers. Sometimes the same carers. Sometimes different ones". One relative told us, "Same group of carers". Rotas aimed to provide staff consistency and were organised on staff availability over a two-week period.
- The registered manager was proud that during the pandemic staff had worked together to cover people's visits without the need to use agency staff.
- Staff had checks completed prior to working with vulnerable people. Checks included, a Disclosure and Barring Service check (DBS), references from their previous employer and a character reference and identification.

Using medicines safely

- People received their medicines safely. People told us, "Yes, they help me" and "Yes I get them on time. Well organised". However, improvements were required to the recording of external medicines including creams and patches where these were applied by staff. For example, one person required assistance from staff to apply their pain patch. Staff had recorded the date the patch was changed and by whom but there was no record of where the patch had been applied. We fed this back to the registered manager who confirmed following our inspection they had taken action to address this shortfall.
- Staff received training in the safe administration of medicines.

Preventing and controlling infection

- People were supported by staff who had a good understanding of how and when to use personal protective equipment. Although one relative told us staff were not always wearing their surgical mask as required. They told us, "Masks are not always worn properly". We fed this back to the registered manager who confirmed following the inspection they were aware of this incident and were managing this.
- Staff undertook regular testing in line with government guidance.
- The provider's office risk assessment had no information of when office staff might need to wear a face mask for example, when a mask might be good for example for source control.

We recommend the provider reviews their protocols and risk assessment in line with government guidance and infection prevention control practices in care settings.

Learning lessons when things go wrong

- Staff recorded incidents and accidents. Copies were retained in people's support plans.
- Incidents and accidents were logged. Records confirmed the incident and actions taken. The provider had a system in place, which ensured all incidents and accidents were monitored.
- People who had been identified as risk of falling were given advice and guidance on how to prevent falls. This had been identified through quality assurance systems in response to the risk of people falling.

Systems and processes to safeguard people from the risk of abuse

- People felt safe. People told us, "Oh yes I feel safe" and "Yes, I feel safe".
- People were supported by staff who had a good understanding of the different types of abuse and who to raise concerns too. One member of staff told us, "Safe, yes. All the carers are really good. I would go to (two managers names given) and the Care Quality Commission". Another member of staff told us the different type of abuse are, "Physical, emotional, sexual, financial. I massively think people are safe, yes".

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.

Staff support: induction, training, skills and experience

- Staff received training and supervisions to ensure they had the skills and competency to support people. Training included, Moving and handling, first aid, safe administration of medicines, food hygiene, safeguarding adults and mental capacity. Staff also had access to training run by the provider's clinical lead who could provide specific training such as stoma care or percutaneous endoscopic gastrostomy (PEG). A PEG feeding tube is where people receive their food and fluids directly into the stomach.
- Staff during the pandemic had received training in infection prevention control and COVID-19. The registered manager had also provided training during the pandemic to other providers for free.
- People were supported by staff who had received person centred training. This gave staff knowledge in how to empower people to make choices about their day to day help and control their life.
- People were supported by staff who had received a five day induction prior to working within the service. Induction records confirmed training staff had completed prior to supporting people.
- Staff received important information and guidance reminders on how to support people with their skin care. For example, the area manager confirmed staff had been sent a poster reminding them of the importance of maintaining healthy skin and actions they should take if they had any concerns.
- Not all staff had received an annual appraisal in line with their start date. The registered manager was aware some staff required an appraisal. Shortfalls relating to staff who required an appraisal were identified on the providers staff file audit. Staff felt supported and able to raise any issues should these arise. One member of staff told us, "They are supportive".

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

- People were supported by staff who liaised with health care professionals when required. One person told us, "Yes they rang the GP for me". Another person told us, "Do (it) myself" in respect of arranging medical appointments.
- The service at the time of our inspection was providing some people with short term support following their discharge from hospital. The registered manager confirmed this was to promote people's recovery and assess what if any ongoing support they required. Health care professionals were liaised with as part of the person's support and recovery.
- The service liaised with the local authority and health care professionals when they identified people had experienced pressure damage to their skin. Staff had been sent memos and reminders of how to identify pressure sores including how quickly they can develop.

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

- People's support plans contained important information relating to people's individual dietary requirements.
- People felt staff gave them choice and options with what they would like to eat. One person told us, "Yes, I have choice". Another person told us, "I get enough to eat and drink". Another person told us, "Oh yes, I get enough to eat and drink. I have a choice".

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

- People were supported by staff who treated them as individuals. One member of staff told us, "We treat people as individuals". They went on to say they respect people as equals. They told us, "We wouldn't unfairly treat someone because of their age, ethnicity, religion, sexuality, gender, social status".

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. All people at the time of the inspection had capacity.

- People were supported by staff who received training in mental capacity.
- Support plans contained important information such as if people had capacity.
- People felt supported by staff who respected their choice and decisions. One person told us, "I can tell them how I want things done". Another person told us, "They would listen if I changed my mind".

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 were supported by staff who respected their wishes. One member of staff told us, "It's people's right to live how they want, in their home there way". They went on to say if someone wants a female carer for personal care then we respect this.
- People felt staff would listen to them if they changed their mind. One person told us, "Yes, they listen to me. Yes, happy if I change my mind". Another person told us, "I tell them, and they listen to me".
- People felt supported by staff who were polite. One person told us, "Yes gentle, polite and we have a laugh". Another person told us, "Yes polite and polite to my friend".
- People told us staff were kind and caring although one person raised with us about a member of staff attitude. People told us, "Oh yes they are kind and considerate. No problems". Another person told us, "Yes they are very caring. Always say goodnight". One person told us, "Very variable personalities". We fed this back to the registered manager so they could review this experience.

Respecting and promoting people's privacy, dignity and independence

- People were supported by staff who promoted independence. One person told us, "They encourage me". Another person told us, "I do most things for myself".
- Staff respected people's privacy and dignity. One person told us, "They cover me with a towel". Another person told us, "They cover me up and shut the door". Another person told us, "Yes, maintain my privacy and dignity".
- Staff had a good knowledge of how to support people with their dignity and independence.

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

- People felt supported by staff who sort their views and respected their decisions. One person told us, "Oh yes they would listen if I changed my mind".
- Staff gave good examples of how they supported people daily with making decisions. One member of staff told us, "We give people choice about if they would like to shower, have a shave and what clothes they would like to wear".

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.

Improving care quality in response to complaints or concerns

- People told us they felt able to raise a complaint although one relative felt they had raised issues about poor communication with the office but nothing had been resolved. They told us, "Communication is a problem. Concerns and messages not getting through". We fed this back to the registered manager so they could address this feedback.
- People's care plans had a copy of the provider's complaints policy.

Planning personalised care to ensure people have choice and control and to meet their needs and preferences

- People's support plans contained important information such as their life history, employment and hobbies.
- The registered manager confirmed people received telephone welfare checks.
- Support guidance was in place for staff to follow in how people wished to have their daily tasks met.
- People did not always feel involved in their care planning. Three people told us they did not feel involved in their support plan. One person when asked if involved in their care plan told us, "No I don't think so". Another person told us, "No care plan". Another person told us, "Don't know what a care plan is". The registered manager confirmed they checked in with people to ensure they were happy with their support plan and this had increased during the pandemic. Support plans reviewed as part of the inspection confirmed people had signed their support plans. We shared people's feedback with the registered manager following our inspection.

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 inspection one person was requiring information in line with the Accessible Information Standard (AIS). Following the inspection the registered manager confirmed one person was supported with their communication through a wipe board.
- Care plans identified where people might require support with having information provided in line with the AIS.
- People's support plans held information such as if the person wore glasses or required a hearing aid.

End of life care and support

- People's support plans held important information such as past medical histories and current health conditions.
- The registered manager confirmed 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 requires improvement.

This meant the service management and leadership was inconsistent. Leaders and the culture they created did not always support the delivery of high-quality, person-centred care.

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

- Improvements were required to the providers quality assurance system as not all shortfalls had been identified prior to our inspection. For example, we found shortfalls in the recording of topical creams and pain patches on body maps. We raised this with the registered manager during our inspection. They took immediate action to address this shortfall.
- The registered manger understood their responsibilities in line with legislation. Although during our inspection we identified two notifications which had been incorrectly submitted under the wrong service details. This had failed to be identified through the providers quality assurance system. We raised this with the registered manager, so notifications are submitted accurately in the future. The area manager confirmed improvements were being made to the provider's quality assurance system.

We recommend the providers quality assurance system is reviewed so shortfalls are identified through robust auditing and an action plan is implemented.

- The service had a registered manager in post.
- A branch audit undertaken in April 2022 monitored, complaints, medicines incidents, missed visits, safe recruitment checks and people's support plans.
- The registered manager reviewed incidents and accidents, and these were monitored through the provider's quality assurance system.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people; Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- During our inspection we received some feedback which we shared with the registered manager so they could look into and address what had been raised with us.
- Following the inspection the registered manager sought views from people with a questionnaire. All three responses confirmed people were happy with their care.
- People also had their views sought through telephone reviews. Records confirmed this.
- Staff felt supported and happy working for Retain Healthcare Bristol. One member of staff told us, "They are supportive". Another member of staff told us, "I get good support". Staff had access to an employee

assistance line should they require additional support.

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 provider spoke in an open and honest way about actions taken when things had gone wrong. They were a family run business with a strong ethos of encouraging and promoting internal progression through the company.
- The provider had a behaviours framework that set core behaviours which staff were expected to work alongside. These behaviours included, 'Excellence, responsibility, working together, leadership, simplicity, trust and respect' were expected of staff. A behaviour framework confirmed what behaviours were expected for example of managerial staff. The providers policy confirmed this.

Continuous learning and improving care; Working in partnership with others

- The registered manager attended management meetings held by the provider.
- The service worked in partnership with local commissioners and health care professionals. One commissioner told us, 'I am perfectly happy and confident with the quality of Retain Healthcare's care provision. We have a good relationship with (name) and (name) in their management team'. They felt the support was positive especially when supporting with certain packages of care.
- Another health care professional told us, "We have been working with retain for nearly 18 months now. We started working with them in the middle of the pandemic and things were very uneasy and new for everyone. In that time, we have had some things to iron out in regards to communication, being so new to each other. Each thing that has cropped up Retain have been willing to support and change things and things have improved considerably".
- The service worked closely with the local hospitals assisting with hospital discharges. The registered manager spoke positively about this partnership working and doing what they can to promote support to people following time in hospital and during the pandemic.