

Real Care Ribble Valley Limited

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Inspection report

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Ratings

Overall rating for this service

Requires Improvement



Is the service safe?

Requires Improvement



Is the service effective?

Requires Improvement



Is the service caring?

Good



Is the service responsive?

Good



Is the service well-led?

Inadequate



Overall summary

This was an announced inspection which took place on 3, 4 and 6 February 2015. We had previously carried out an inspection in September 2013 when we found the service had breached one of the regulations we reviewed. We made a compliance action that required the provider to make the necessary improvements in relation to the records maintained regarding people who used the service. Following the inspection in September 2013 the

provider sent us an action plan telling us what steps they were going to take to ensure compliance with the regulation. We revisited the service in March 2014 and found the required improvements had been made.

Real Care Ribble Valley is registered to provide personal care to people living in their own homes. At the time of our inspection there were four people using the service.

Summary of findings

The provider had a registered manager in place as required by the conditions of their registration with the Care Quality Commission (CQC). A registered manager is a person who has registered with the CQC to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.

We identified six breaches of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010. You can see what action we told the provider to take at the back of the full version of this report.

People who used the service told us they felt safe when staff from Real Care Ribble Valley provided them with any care or support. They told us there were always sufficient staff available to meet their needs and that staff always arrived promptly and stayed for the correct amount of time. However, we found recruitment processes in the service did not protect people from the risk of staff who were unsuitable to work with vulnerable people. This was a breach of Regulation 21 Health and Social Care Act 2008 (Regulated Activities) Regulations 2010.

Staff had not been provided with any induction, training, supervision or appraisal since they commenced employment at Real Care Ribble Valley. The registered manager told us this was because they were relying on the fact that staff were employed in another, unrelated agency and had therefore received the training they required for their role. This was a breach of Regulation 23 Health and Social Care Act 2008 (Regulated Activities) Regulations 2010.

Although staff were able to tell us about the action they should take if they had concerns about a person who used the service, this knowledge was based on training undertaken with other employers and was not necessarily up to date. Staff had not had the opportunity to read the service's policy relating to the safeguarding of vulnerable adults. The lack of appropriate arrangements to safeguard people who used the service from the risk of abuse was a breach of Regulation 11 Health and Social Care Act 2008 (Regulated Activities) Regulations 2010.

Risk assessments had not been completed in relation to the individual needs of people. This meant there was a risk people might receive inappropriate or unsafe care. This is a breach of Regulation 20 Health and Social Care Act 2008 (Regulated Activities) Regulations 2010.

The systems in place to manage the way medicines were administered to people who used the service were not sufficiently robust to protect people from the risks associated with the unsafe handling of medicines. This was a breach of Regulation 13 Health and Social Care Act 2008 (Regulated Activities) Regulations 2010.

People who used the service told us they were able to make choices about the way their care was provided. Although records we looked at showed staff had not received specific training in the Mental Capacity Act (MCA) 2005, staff told us they would always support people to make their own decisions and remain as independent as possible in line with the principles of this legislation.

All the people we spoke with were highly complimentary about the staff from Real Care Ribble Valley Limited and in particular the registered manager. Comments people made to us included, "Staff are very good and very caring" and "The care is excellent. We would give them [staff] 10 out of 10." People who used the service told us staff always treated them with dignity and respect.

During our discussions with staff they demonstrated their understanding of person-centred care. Staff told us they would always listen to people to ensure they provided the care people wanted in a way which promoted people's independence and choice.

All the people we spoke with told us the care provided by the service was responsive to their needs. The registered manager was in daily contact with all the people who used the service and was able to ensure care was organised in a way which was sufficiently flexible to meet the needs of people who used the service and their carers.

Although there were systems in place to record any complaints about the service, the registered manager told us the fact that they had regular contact with all the people who used the service meant any concerns could be immediately addressed. As a result there had been no complaints received in the service.

Summary of findings

Staff told us they were happy working in the service. They told us they were treated fairly and the manager was approachable. However, there were no opportunities for staff to provide feedback on the service.

There were no quality assurance systems in place in the service. This was due mainly to the fact that, because of a

lack of staff, the registered manager was providing direct care to people who used the service rather than focusing on the required management tasks. This was a breach of Regulation 10 Health and Social Care Act 2008 (Regulated Activities) Regulations 2010.

Summary of findings

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

The service was not safe.

Recruitment processes did not protect people who used the service from the risk of unsuitable staff.

People who used the service told us they felt safe when they received care and support and that there were sufficient staff to meet their needs. However, there was a lack of appropriate arrangements to protect people who used the service from the risk of abuse.

People were not adequately protected from the risks associated with the unsafe handling of medicines. The provider had also failed to maintain accurate records in relation to people who used the service.

Requires Improvement



Is the service effective?

The service was not effective.

Although people who used the service were confident in the skills and abilities of staff, we found there were no systems in place to ensure staff had the induction, training, knowledge and support they required for their role.

People who used the service told us they received the care they required. Although they had not received specific training in the Mental Capacity Act (MCA) 2005 staff told us how they supported people to make their own decisions and to maintain as much independence as possible.

Requires Improvement



Is the service caring?

The service was caring. People we spoke with provided positive feedback about the caring nature of staff.

People who used the service told us their dignity and privacy was always respected by staff.

Staff we spoke with were able to show that they knew people who used the service well. Staff demonstrated a commitment to promoting people's independence and choice.

Good



Is the service responsive?

The service was responsive to people's needs. People who used the service told us they had control over the care they received and that it was flexible to meet their needs.

Systems were in place to record and address any complaints received at the service.

Good



Summary of findings

Is the service well-led?

The service was not well-led. Although there was a registered manager in place, they did not have systems in place to monitor the quality of the service people received.

Staff told us they were happy working in the service. However, we found there were no systems in place to provide staff with the opportunity to comment on and influence the quality of the service provided.

Inadequate



Real Care Ribble Valley Limited

Detailed findings

Background to this inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection was planned to check whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

We told the provider two working days before our visit that we would be coming. This was to ensure the registered manager and staff would be available to answer our questions during the inspection. On 3rd February 2015 we spoke on the telephone to three of the people who used the service, one relative and one staff member. On 4th February 2015 we visited the registered office for the service to meet with the registered manager. On 6th February 2015 we spoke on the telephone with an additional two members of staff.

The inspection team consisted of one adult social care inspector. We had not requested the service complete a provider information return (PIR); this is a form that asks the provider to give us some key information about the service, what the service does well and improvements they plan to make. However, before our inspection we reviewed the information we held about the service including notifications the provider had sent to us. We contacted the Local Authority safeguarding team, the local commissioning team and the local Healthwatch organisation to obtain their views about the service. Healthwatch is an independent consumer champion that gathers and represents the views of the public about health and social care services in England.

During the inspection we looked at the care records for the four people who were using the service. We also looked at a range of records relating to how the service was managed; these included staff files, training records and policies and procedures.

Is the service safe?

Our findings

All the people we spoke with told us they felt safe when they received care and support from the service. One person commented, "I feel very safe, They are all very good people." A relative also told us, "I know I can get a good night's sleep when Real Care staff are here. I feel the care is safe."

However, we found recruitment processes for the service did not protect people from the risks of unsuitable staff. We were shown the files for two of the four staff employed in the service but were informed by the registered manager that no recruitment details had been kept for the other two members of staff. Of the two staff files we reviewed, we found only one person had completed an application form but this did not include a full employment history. There was no evidence that an interview had taken place with either member of staff and no pre-employment checks such as references and checks with the Disclosure and Barring service (DBS) had been completed by the registered manager. The registered manager told us that they were relying on the fact that all four staff worked for another, unrelated domiciliary care agency where the required pre-employment checks would have been completed.

The lack of effective recruitment and selection procedures was a breach of Regulation 21 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010.

People who used the service told us there were always sufficient numbers of staff available to meet their needs. They told us staff always arrived promptly and stayed for the correct amount of time. One person told us, "We always know who is coming." A relative commented, "They have never cancelled visits. We get good continuity of care with Real Care."

Records we looked at showed none of the staff employed by the service had completed training which had been organised by Real Care Ribble Valley Limited in the safeguarding of vulnerable adults. We saw two staff had completed this training with a different employer in February 2014 but there were no records of training completed by the other two staff members.

Staff we spoke with were able to tell us of the action they would take should they have any concerns about a person

who used the service; this included contacting the registered manager or the local authority. Staff told us this knowledge was based on training they had received with other employers and was not necessarily up to date.

The registered manager told us that staff did not attend the registered office and had therefore not had the opportunity to review the policy relating to the safeguarding of vulnerable adults who used the service. The registered manager was also unaware of the multi-agency policies and procedures produced by the local safeguarding adults board which the service would be expected to adhere to. This meant there was a risk people who used the service might not be adequately protected from the risk of abuse.

The lack of appropriate arrangements to protect people who used the service from the risk of abuse was a breach of Regulation 11 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010.

Care records we reviewed showed there were systems in place to assess the risks in relation to the home environment of each person who used the service. The risk assessment tool stated that the environmental risks should be reviewed every three months but we noted this had not taken place on any of the records we looked at. The registered manager told us there had not been any changes to report but acknowledged the records did not support this assessment.

There were no risk assessment or risk management plans in place in relation to the individual needs of people who used the service. This meant there was a risk staff would not know what action they should take to manage any risks relating to specific medical conditions such as diabetes or the restricted mobility of people who used the service and any risk of falls.

The lack of accurate records in relation to people who used the service was a breach of Regulation 20 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010.

We looked at the arrangements in place for supporting people who used the service to take their medicines as prescribed. The registered manager told us none of the four people who were using the service at the time of the inspection required staff to administer their medicines. However, records we looked at showed staff were applying a prescribed cream to one person. Although the care plan made reference to this there was no Medication

Is the service safe?

Administration Record (MAR) chart in place for staff to record when they had applied the cream. However, we saw that some staff had recorded this information in the daily records sheets. We discussed this with the registered manager who told us they would contact the chemist which dispensed the person's medicines to request a MAR chart be produced for staff to use.

We noted there were policies and procedures in place in relation to the management of medicines in the service. We saw that the registered manager had recently completed

training in assessing the competency of staff to administer medicines. However, staff records we reviewed showed two staff had not completed training in the administration of medicines in the previous 12 months. The registered manager was unable to tell us when the other two staff had completed this training.

The lack of appropriate arrangements in place to ensure the safe handling of medicines in the service was a breach of Regulation 13 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010.

Is the service effective?

Our findings

People who used the service told us they considered staff had the required skills, knowledge and experience to meet their needs effectively. One person commented, “I would give the staff 10 out of 10.” A relative also told us, “Staff listen and have the right skills for the job.”

Staff told us they had not completed a formal induction when they commenced employment at Real Care Ribble Valley Limited although they had been introduced to everyone who used the service by a more experienced member of staff and told about the care people required. All of the staff we spoke with worked in other care settings and told us they were confident in carrying out their role at Real Care Ribble Valley Limited.

Staff told us they had received the training they needed to carry out this role effectively but that this had been completed with other employers rather than with Real Care Ribble Valley. One staff member told us they had not been asked to provide proof of this training by the registered manager of the service.

The registered manager told us they did not maintain a central record of the training completed by staff. This meant they were unable to check when required updates needed to be provided. We saw that the registered manager had also not completed any recent training in moving and handling, first aid or food hygiene although they were regularly providing care to people who used the service.

Although there were policies in place in relation to the supervision and appraisal of employees, the registered manager told us they had not carried out any formal supervision with any staff. They had also not completed any ‘spot checks’ to ensure that staff were providing safe and effective care.

The lack of effective training, supervision and appraisal for staff was a breach of Regulation 23 Health and Social Care Act 2008 (Regulated Activities) Regulations 2010.

None of the staff we spoke with had received specific training in the Mental Capacity Act (MCA) 2005; this legislation is intended to ensure people receive the support they need to make their own decisions wherever possible. However, staff were able to tell us how they supported

people to make choices in relation to the care they received, including the clothes people wished to wear and their preferences regarding the meals staff prepared for them.

People who used the service told us they were always able to make choices about the care and support they received. One person commented, “[Staff] do exactly what I want.”

Staff told us they would refer to care plans to make sure they were providing the care people required. However, one staff member we spoke with on 6th February 2015 told us there was no care plan in place for one particular person to whom they provided care although the person was able to tell them what care and support they required. We had looked at the care records for this person during our visit to the registered office on 4th February 2015 and found there was a care plan in place although it had not been signed or dated. The staff member told us they had not been in work for a week which indicated the care plan had been completed since we announced our inspection to the registered manager on 2nd February 2015.

We saw care plans included information about the goals people wished to achieve from the care they received from Real Care Ribble Valley Limited. However, we noted the same information had been printed on all of the care plans we reviewed. This meant there was a risk care plans were not personalised to ensure people who used the service were supported to achieve the goals which were important to them.

People who used the service told us they received support from staff to prepare meals. Staff told us they would either shop for people for the necessary ingredients or would use the food available in people’s homes. One person who used the service commented, “Staff are good at making meals. They do what we want them to.”

We noted there was some information in one of the care files we reviewed about the preferences of the person in relation to the meal staff prepared for them. However, this same level of information was not included in the other care records we reviewed. Staff told us they would check the daily records of people they were supporting to review their dietary intake and to try and ensure people were provided with a balanced diet.

The registered manager told us one of the people who used the service had diabetes but there was no information in the care file about the support staff needed to provide to

Is the service effective?

help ensure the person was able to manage this condition effectively. There were also no systems in place to assess and monitor the weight or nutritional needs of people who used the service. The registered manager told us this was not currently necessary for any of the people who used the service and that they would always contact the person's GP if they had any concerns about their weight.

People who used the service told us staff would always support them to access health care services if necessary. One person commented, "If I need the doctor [the registered manager] will always contact them for me."

Is the service caring?

Our findings

People who used the service were very complimentary about the staff from Real Care Ribble Valley Limited. Comments people made to us included. "Staff are very good and very caring" and "The care is excellent. We would give them [staff] 10 out of 10." All the people we spoke with spoke highly about the caring attitude of the registered manager. One person told us. [The registered manager] is a very caring person."

All the people we spoke with told us staff always treated them with dignity and respect. A relative also told us. "Staff speak to [my relative] in a respectful manner. Staff listen to him." Staff we spoke with were able to show that they knew people who used the service well. They all demonstrated a commitment to providing high quality care and support to people.

We asked staff what they understood by person centred care. Comments staff made to us included, "It's doing what people want. Although I look at care plans, sometimes people say they prefer things to be done in a particular way and I always do this" and "I read care plans but always give people a choice about the care I provide."

Staff told us they would always promote people to maintain their independence as much as possible. One staff member told us, "I monitor what people are able to do for themselves and offer support to maintain their independence. I don't do things to make my job easier." Another staff member commented, "I always speak to people and ask them what they want me to do."

Is the service responsive?

Our findings

People told us the service provided from Real Care Ribble Valley Limited was responsive to their needs. They told us they felt they had control over the service they received and were able to make changes to their care plan if necessary. This view was confirmed by a relative who told us. “The care is flexible to meet [my relative’s] changing needs. It’s a continual review process. You can’t ask for much more flexibility.”

We looked at the care files for the four people who were using the service at the time of the inspection. We saw the registered manager completed an initial assessment with people before they started using the service; this should help ensure staff were able to meet people’s needs.

There was evidence on one of the care files that a meeting had taken place involving the person who used the service, staff and the GP to review the care that was provided by Real Care Ribble Valley. There was no evidence on the files of the two other people who had been receiving a service for several months that a review meeting had taken place.

We discussed the lack of reviews for some people with the registered manager. They told us that as they were responsible for providing care to all of the people who used the service, they received ongoing feedback and were able to adjust the care people received as necessary. This was confirmed by one person who used the service who told us, “We have talked about things with [the registered manager] and I get what I need.”

We saw there was information about how to make a complaint included in the documents people were given when they started to receive a service from Real Care Ribble Valley. All the people we spoke with told us they were extremely happy with the service they received but would feel confident to raise any concerns they might have with the registered manager. People were confident they would be listened to and taken seriously. Comments people made to us included, “I would speak to [the registered manager]; I am sure they would assist” and “I find [the registered manager] very easy to deal with.”

The registered manager told us there had not been any complaints received at the service. They told us their daily contact with people who used the service meant any concerns could be immediately addressed.

Is the service well-led?

Our findings

There was a registered manager in post at the service. The manager had been registered with CQC since October 2012.

The registered manager told us that the key achievement of the service since the last inspection had been its continued growth and progression. They told us they considered they were slowly becoming recognised as a service providing good quality care in the local area. This view was confirmed by our discussions with people who used the service, two of whom told us they had chosen Real Care Ribble Valley Limited following recommendations from other people.

At the time of our inspection the registered manager told us that, due to a lack of staff, most of their efforts were focused on providing direct care to people who used the service rather than on required management tasks. As a result we found there were no quality assurance processes in place for the service. No satisfaction surveys had been

developed and there was no plan of audits in place; this had resulted in the shortfalls we had identified during the inspection. The registered manager told us they had enrolled on a management training programme but had been unable to implement any learning from this programme into how the service was run due to the lack of staff to provide direct care to people.

Staff we spoke with told us they enjoyed working for the service and considered they were treated fairly by the registered manager who they found to be approachable. However, we found there were no staff meetings taking place which meant staff did not have the opportunity to comment on or influence the quality of the service provided.

The lack of systems to monitor the quality of the service people received was a breach of Regulation 10 Health and Social Care Act 2008 (Regulated Activities) Regulations 2010.

This section is primarily information for the provider

Action we have told the provider to take

The table below shows where regulations were not being met and we have asked the provider to send us a report that says what action they are going to take. We did not take formal enforcement action at this stage. We will check that this action is taken by the provider.

Regulated activity	Regulation
Personal care	Regulation 21 HSCA 2008 (Regulated Activities) Regulations 2010 Requirements relating to workers The provider did not have effective recruitment and selection processes in place.

Regulated activity	Regulation
Personal care	Regulation 11 HSCA 2008 (Regulated Activities) Regulations 2010 Safeguarding people who use services from abuse The provider had not made suitable arrangements to ensure that service users are safeguarded against the risks of abuse.

Regulated activity	Regulation
Personal care	Regulation 20 HSCA 2008 (Regulated Activities) Regulations 2010 Records The provider had failed to maintain accurate records in relation to people who used the service.

Regulated activity	Regulation
Personal care	Regulation 13 HSCA 2008 (Regulated Activities) Regulations 2010 Management of medicines People were not protected against the risks associated with medicines because the provider did not have appropriate arrangements in place for the safe administration and recording of medicines.

Regulated activity	Regulation
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This section is primarily information for the provider

Action we have told the provider to take

Personal care

Regulation 23 HSCA 2008 (Regulated Activities) Regulations
2010 Supporting staff

The provider did not have suitable arrangements in place to ensure that people employed for the purposes of carrying on the regulated activity are supported by receiving training, supervision and appraisal.

Regulated activity

Regulation

Personal care

Regulation 10 HSCA 2008 (Regulated Activities) Regulations
2010 Assessing and monitoring the quality of service provision

The provider did not have systems in place to monitor the quality of the service that people receive.