

Rainbow Social Care Limited

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Inspection report

1st Floor, Office No. 9, Innovation House
Molly Millars Close
Wokingham
Berkshire
RG41 2RX

Tel: 01184028923

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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

This inspection took place on 16 April 2018 and was announced. We gave the provider prior notice because the location provides a domiciliary care service and we needed to make sure someone would be in the office.

Rainbow Social Care Limited is a domiciliary care agency that provides personal care to people in their own homes. It provides a service to older adults, people living with dementia, physical and learning disability and sensory impairments. The Care Quality Commission (CQC) only inspects the service being received by people provided with the regulated activity 'personal care'; help with tasks related to personal hygiene and eating. Not everyone using the service receives the regulated activity. Where they do we also take into account any wider social care provided. At the time of our inspection the service was providing personal care to 16 people.

The service had a registered manager in place. A registered manager is a person who has registered with the Care Quality Commission 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.

At our last inspection we rated the service Good. At this inspection we found the evidence continued to support the rating of Good. There was no evidence or information from our inspection and ongoing monitoring that demonstrated serious risks or concerns. This inspection report is written in a shorter format because our overall rating of the service has not changed since our last inspection.

People felt safe while supported by the staff. Staff had a good understanding of how to keep people safe and their responsibilities for reporting accidents, incidents or concerns. Staff had the knowledge and confidence to identify safeguarding concerns and acted on these to keep people safe.

Staff training records indicated which training was considered mandatory. The registered manager and senior staff had planned and booked training when necessary to ensure all staff had the appropriate knowledge to support people. Staff had ongoing support via regular supervision and appraisals. They felt supported by the registered manager and maintained great team work. People were very complimentary of the staff and the support and care they provided.

People were supported by sufficient numbers of staff to meet their individual needs. People were informed about the changes to their visits as necessary. The service had an appropriate recruitment procedure to follow before new staff were employed to work with people. They checked to ensure staff were of good character and suitable for their role.

People were treated with respect, and their privacy and dignity were promoted. People and relatives felt the staff supported them in the way they wanted. Staff were responsive to the needs of the people and enabled

them to improve and maintain their independence with personal care.

The staff monitored people's health and wellbeing and took appropriate action when required to address concerns. The service assessed risks to people's personal safety, as well as staff and visitors, and plans were in place to minimise those risks. There were safe medicines administration systems in place and people received their medicines when required.

People received support that was individualised to their specific needs and were kept under review and amended as changes occurred. People's rights to make their own decisions, where possible, were protected and respected. Staff were aware of their responsibilities to ensure people's rights were promoted.

Staff felt the registered manager was supportive and approachable. They had good communication, worked well together and supported each other, which benefitted the people. The registered manager had quality assurance systems put in place to monitor the running of the service and the quality of the service being delivered. The registered manager was able to identify issues and improvements necessary and action was being taken to address these. They praised the staff team for their dedication and hard work and appreciated their contribution to ensure people received the best care and support.

Further information is in the detailed findings below.

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 remained safe.	Good ●
Is the service effective? The service remained effective.	Good ●
Is the service caring? The service remained caring.	Good ●
Is the service responsive? The service remained responsive.	Good ●
Is the service well-led? The service remained well-led.	Good ●

Rainbow Social Care 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 checked 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.

This inspection took place on 16 April 2018. It was carried out by one inspector and was announced. We gave the provider prior notice because the location provides a domiciliary care service and we needed to make sure someone would be in the office. An expert by experience made telephone calls to interview people and/or their relatives. This is a person who has personal experience of using or caring for someone who uses this type of care service.

We reviewed the information the provider sent us in the Provider Information Return (PIR). 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. Prior to the inspection we looked at the PIR and all the information we had collected about the service. This included previous inspection reports, information received and notifications the registered manager had sent us. A notification is information about important events which the service is required to tell us about by law. We also contacted five community professionals for feedback. We received feedback from three professionals.

During the inspection we spoke with six people who use the service. We spoke with the registered manager and received feedback from staff. We looked at records relating to the management of the service including five people's care plans and associated records. We reviewed recruitment records, staff training records, quality assurance records, the compliments/complaints and policies relating to running of the service.

Is the service safe?

Our findings

People felt safe in their homes and liked the staff who supported them. People could speak with staff if they were worried. They said, "I feel very safe with the carers. They arrive on time most days and if they are held up, they phone me to let me know" and "Yes, I feel safe with them, and I am quite pleased with them". Staff undertook safeguarding awareness training to understand their responsibilities in keeping people safe. Staff had a good understanding of when to report concerns, accidents and/or incidents to the registered manager. The provider had a whistleblowing policy to ensure staff were aware of how to raise concerns and staff confirmed they were aware of it. The registered manager understood their responsibilities in regards to safeguarding people who use the service and reporting concerns to external professionals accordingly.

The registered manager assessed the risks to people's personal safety and put plans in place to minimise these risks. Risk assessments included information about people's needs and skills, and provided information for staff to monitor their safety. As people's needs changed, risk assessments were also adjusted to reflect it. As part of the care plan, the service carried out a health and safety assessment of the environment to ensure the person, their family and staff were safe while carrying on the regulated activity.

The registered manager had recruitment procedures in place to ensure suitable staff were employed. They included a health check and a Disclosure and Barring Service check to confirm candidates did not have a criminal conviction that prevented them from working with vulnerable adults. Additionally, interviews were designed to establish if candidates had the appropriate attitude and values. We found some discrepancies with employment history for two staff. The registered manager promptly rectified the error and sent us information after the inspection.

The registered manager determined the number of staff required according to the needs of the people using the service. They arranged staff holidays in advance to ensure all the visits were covered with the right number of staff. The registered manager also helped with visits and checked if people were happy with their care. There were no missed visits and staff stayed the right amount of time to support people. If the staff were late to visit a person, then people were informed about it and people confirmed it. They said, "Occasionally they may be a bit delayed for the tea time call but the traffic around here is awful at that time of day. It's not their fault and they do ring and let me know where they are" and "We have a 'team' of regular girls that come to help me and my wife. They always stay the right amount of time and check whether there is anything else we need before they go". The staff confirmed they had time to visit and support people and helped each other to cover absences. The registered manager felt the staff worked well together as a team which had a positive impact on people's care and support.

Staff adhered to medicine policies and procedures in order to manage and administer peoples' medicines safely. Staff did not administer medicines to people unless they were trained to do so. Staff helped people order the medicine and prompted them to take it according to the care plan. The registered manager reviewed medicine record sheets for any errors. There were no recent medicine errors and the records were accurate and complete. We reviewed nine medicine record sheets and there were no gaps. Staff used codes to indicate if, for example, the person did not have a visit. The registered manager explained if there were

errors found, they would take action to support people and investigate the matter.

There was a system for recording accidents and incidents. There had been no incidents or accidents at the time of inspection. The registered manager explained how they would address it and the support that would be provided to the people who use the service. They would also discuss this with the team for ideas of improvements or if things could have been done differently. The registered manager praised the staff for being vigilant and reporting any changes or issues effectively. The service had continuity plans to ensure the service could continue in the event of an emergency. There was information for staff about who to contact should they need help and advice and staff confirmed this. Staff were provided with and used personal protective equipment to prevent the spread of infection. People confirmed this and said this was happening while the staff supported them.

Is the service effective?

Our findings

People spoke positively about staff and told us they were skilled and able to meet their needs. We received complimentary comments from people and relatives about the support they valued most. They said, "I think the girls are very well trained. Sometimes a new girl will come with an existing member of the team to see how things are done" and "They always check with me what I want done and whether they've done it the way I want it done. Often they do extra bits for me if there's time. They always leave me with a drink before they go". Staff ensured the personal care people received was effective and resulted in a good quality of life.

We reviewed the latest training matrix provided to us which recorded mandatory training. Where training was out of date, the registered manager had already booked the staff to complete the refresher training. Each member of staff had a certain period of time to complete it. The registered manager and senior staff regularly monitored the attendance of staff to ensure they were all up to date.

When new staff started they had an induction that included training and a period of shadowing experienced staff before working on their own. New staff were introduced to people before they started supporting them. People confirmed new staff were supported by experienced staff to observe the visit. All staff completed the Care Certificate as part of their role. It is a set of 15 standards that new health and social care workers need to complete during their induction period. Staff felt they received enough training to help them carry out their roles effectively.

People were supported by staff who had regular supervisions (one to one meetings) with their line manager. Staff felt they could contact the registered manager any time to discuss various topics or ask for advice. The registered manager and staff said they always kept in touch with each other and it helped them work well as a team. The registered manager praised the staff team and said their communication ensured people received excellent care and support at all times.

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 and relatives agreed staff respected people's wishes. They said, "The girls are lovely, they look after me really well. They ask what I want done" and "Yes they are good and helpful to me. They always ask me what they can do for me. They help me with washing and dressing. They ask me what I want to wear". Staff knew it was important to communicate with the person and ensure they always had a choice and the right to make decisions about their care and support. The registered manager demonstrated a good understanding of mental capacity considerations and presuming capacity to ensure people could make their own decisions.

Some people needed support with eating and drinking as part of their care package. The level of support

each person needed was identified in their support plan. For example, if someone needed encouragement with drinking and having a balanced diet, there was guidance available for staff. People said staff helped them with preparing meals and offered choice of meals. Staff were aware of how to monitor people's food and fluid intake if there were any concerns regarding their diet.

Staff made sure people's health and care needs were met in a consistent way. They communicated with each other and the registered manager reporting any changes or issues. If needed, health or social care professionals were involved. Each person had individual needs assessments that identified their health and care needs. The registered manager and staff communicated with GPs, local authority, community nurses, occupational therapist, dentist, pharmacies and families for guidance and support. People were checked to make sure they were supported effectively and changes were identified quickly. They said, "Yes, they are well trained and they pick up on things very quickly and will suggest I call the doctor".

Is the service caring?

Our findings

People felt they were treated with compassion and kindness by the staff team and the registered manager. People and relatives praised staff's effort and care when supporting people. They delivered care and support that was caring and person-centred which had a positive effect on people. People said, "They're always kind. Whether they are helping me at home or whether they are taking me out shopping, they are always looking out for me" and "They are very polite but I am in control of what happens".

The registered manager placed importance on ensuring continuous support to people from regular staff. People and staff knew each other well and had well established relationships. The registered manager regularly checked people were happy with their support and listened to any issues or questions. Staff always made sure people were comfortable and relaxed in their own homes and able to share any concerns. People said, "The staff are usually very kind to me. They are warm, friendly and pleasant", "I've been having help for a few months now and I am impressed by just how kind the staff are" and "The girls are very kind to both myself and my [family member]". Staff knew people's individual communication skills, abilities and preferences. People's records included information about their personal circumstances and how they wished to be supported.

Staff ensured people were fully involved with their care promoting independence whenever possible. They always tried to enable people to express their own views ensuring people received the care they needed and wanted. The registered manager and staff team ensured people felt they mattered and were supported and encouraged to live an independent life as much as possible. Staff understood people's independence was an important aspect of their lives, for example, taking part in their personal care or helping with some activities. Staff were there to help if someone needed assistance. They said, "Service users are encouraged to do as much as possible for themselves. When I see they struggle, I will ask if they need help. Staff are advised to promote independence as well".

People agreed staff respected their dignity and privacy at all times. They told us they were very happy with the care they received. People felt the staff showed kindness and compassion while supporting and caring for them. They said, "They don't stand over you all the time when helping with personal care. If they leave the room they knock on the door when they come back in, they're very considerate" and "They don't rush me through the help they give me and they make sure that the curtains and doors are closed when I'm getting washed".

The registered manager was complimentary of the staff's conduct towards people. They said, "I can trust my staff. I am so thankful for them. The company is built on good staff". Staff were able to give examples of how dignity and privacy was respected. They understood the importance of treating people respectfully. They said, "Ensure they are happy and comfortable during personal care, ask for service user's views and experiences" and "I ensure that during personal care doors and curtains are closed". People's care was not rushed enabling staff to spend quality time with them. People felt staff took their time to complete all the tasks and provide support that was needed. Any private and confidential information relating to the care and treatment of people was kept in their home in a chosen place. This information was also kept securely

in the office. Staff were aware of confidential information sharing and discussed it only with relevant people such as professionals or family with people's permission.

Is the service responsive?

Our findings

People received the care and support they needed at the time specified in the care plan. People were informed when the visits were late or changes had to be made regarding staff attending the visit. When staff visited, they would make sure people were comfortable and happy before they left. People received care and support that was responsive to their needs because staff had a good knowledge of the people. They said, "The help they give me has been very good" and "I've only had the company for a couple of weeks since I came out of hospital but I am very happy with the way they look after me. They are cheerful and chatty and they're very good at noticing if I'm not well".

Each person had an individual care plan which included practical information on maintaining the person's health and wellbeing, emotional support, and their daily routines. People were involved in the care planning process. The staff were responsive to requests and suggestions, and people's needs and wishes. The care plans had been regularly reviewed and updated to ensure they accurately reflected people's current care needs. People said, "I know the girls now and they know me and how I like things. It's comfortable" and "Our care plans were talked through with us when they started helping us years ago and they come along and review it roughly every 6 months".

People received support that was individualised to their personal preferences, needs and cultural identities. Staff used these plans as an important source of information to make sure the support they provided was personalised to each individual. People felt all staff were approachable, polite and supportive. The care and support provided at each visit was recorded. There was information about people's physical health, emotional wellbeing and how they spent their day. This helped staff monitor people's health and wellbeing, responding to any changes and enabling them to make timely referrals to appropriate professionals.

We looked at whether the service was compliant with the Accessible Information Standard. The Accessible Information Standard is a framework put in place from August 2016 making it a legal requirement for all providers to ensure people with a disability or sensory loss can access and understand information they are given. Records indicated whether people had disabilities or sensory impairments. There was some guidance in communicating with people in a manner they could understand. It was available in care plans, for example, when they speak to the person to speak slowly and clearly. The registered manager said they would review people's communication needs to ensure the information was highlighted and in line with the guidance. This would ensure all information presented was in a format people would be able to receive and understand it.

The registered manager and staff sought feedback about the support and service from people. They asked and checked people during visits and encouraged people to contact them if they wanted more support. Staff shared any information about people with each other and the registered manager on a regular basis. This helped them take prompt actions that would help manage risks associated with people's care and support.

There had been no complaints since the last inspection in January 2016. The registered manager took

complaints and concerns seriously and would use it as an opportunity to improve the service. They encouraged people, their relatives and staff to always share any issues or concerns so it would be addressed in a timely manner to avoid further negative impact. People said, "I've never had to complain about anything but I would speak to the office if I had any problems but the manager is very good at checking up and making sure everything is okay. She's very easy to talk to" and "I complained a long time ago. They sorted it out for us very quickly. They never made us feel awkward about it". Staff knew it was important to encourage people to raise any concerns with them. They knew how to report concerns or issues to the registered manager to be addressed.

Is the service well-led?

Our findings

It is a condition of registration with the Care Quality Commission (CQC) that the service has a registered manager in place and there was one. The registered manager had notified CQC about significant events. We used this information to monitor the service and ensure they responded appropriately to keep people safe.

People were complimentary about the care and support and felt their care during visits was managed well. The service's aim and objectives were to provide people with person centred, high quality support and care. The registered manager and staff ensured people, and what was important to them, were at the centre of their work. People felt respected, consulted and involved as per the aims and objectives of the service. The registered manager promoted a positive culture and wanted to ensure staff felt the management was available, approachable and supportive.

The registered manager had a quality assurance system in place to assess and monitor the service delivered. They regularly sought feedback from people and their relatives to help them monitor the quality of service provided and pick up any issues or prevent incidents. If they identified any issues, they took actions as soon as possible to make improvements. Any feedback was discussed with staff and how to ensure best outcomes for people. The registered manager also used audits of the files, log sheets, medicine records, visits, staff performance checks and supervisions to monitor the service quality. There were no missed visits and people confirmed staff arrived on time. People's experience of care was monitored through daily visits, quality assurance visits, care reviews, and regular contact with people and their relatives. The registered manager also attended the visits to support people. They used it as an opportunity to observe staff's performance and practice and identify any issues or training needs. The registered manager felt the staff were very good at picking things up and informing them if anything needed to be done or addressed. People's needs were accurately reflected in detailed care plans and risk assessments. Records were complete, accurate and stored appropriately.

The service worked closely with health and social care professionals to achieve the best care for people they supported. The professionals agreed the service provided was of high quality, staff were caring and responsive, and they did not have any concerns. They said, "Rainbow works well with all social care and health professionals and updates staff when they have a concern about a client. [The registered manager] exhibits good management and leadership skills".

Staff had team meetings and discussed various topics such as any changes in people's needs or care, best practice and other important information related to the service. Staff had clearly defined roles and understood their responsibilities in ensuring the service met the desired outcomes for people. Staff and the registered manager worked together as a team and motivated each other to provide people with the support and care they wanted. They understood their duty of care and their responsibility to alert the senior staff if they identified any concerns in the quality of care provided. Staff felt there were opportunities to discuss issues or ask for advice. Staff felt they were supported and listened to by senior staff when they approached them. The registered manager encouraged open and transparent communication in the service. They valued how staff worked well together as a team. They said, "The staff are very good,

committed and work hard. Clients like them".