

# Eagle and Jinnah Partnership

# Reagle Home Care Services (RHC)

### **Inspection report**

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### Ratings

Overall rating for this service	Good •
Is the service safe?	Good
Is the service well-led?	Good

# Summary of findings

## Overall summary

#### About the service

Reagle home care is a domiciliary care service. The service provides support to older people in their own homes, some of whom may be living with dementia. At the time of our inspection there were 48 people using the service.

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

People being supported by the service were safe. Risks to people's safety and well being were identified and manged well. People received their medicines as prescribed. Staff had received training relevant to their roles which ensured they had the skills and knowledge to meet people's individual identified needs.

Accidents or incidents were managed and reviewed to help identify any trends and any learning from events was shared with staff to help reduce the risk of happening again.

The service had effective infection, prevention, and control measures to keep people safe. This included following current guidance. Personal protective equipment [PPE] was provided to staff.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk Rating at last inspection. The last rating for this service was good. The service remains rated Good.

#### Why we inspected

We undertook a focused inspection to review the key questions of safe, and well-led only. This was because the service had not been inspected since 10/10/2017

We looked at infection prevention and control measures under the Safe key question. We look at this in all inspections, even if no concerns or risks have been identified. This is to provide assurance that the service can respond to COVID-19 and other infection outbreaks effectively.

For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating. The last report published on 10/11/2017

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Reagle home care services on our website at www.cqc.org.uk. We will continue to monitor information we receive about the service, which will help inform when we next inspect.

# 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	
Is the service well-led?	Good •
The service was well led	



# Reagle Home Care Services (RHC)

**Detailed findings** 

## Background to this inspection

#### Background 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 was completed by one inspector.

#### Service and service type

Reagle home care is a domiciliary care service. Providing a regulated activity of personal care to people living in their own homes in the community.

#### Registered Manager

This provider is required to have a registered manager to oversee the delivery of regulated activities at this service. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations. At the time of our inspection there was a registered manager in post.

#### Notice of inspection

This inspection was announced. We gave the registered manager 24 hours notice as this is a small service and we wanted to make sure the registered manager would be available to support the inspection. Inspection activity started on 1 December 2023 and ended on 4 December 2023. We visited the service on 1 and 4 December 2023.

#### What we did before the inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority and professionals who work with the service. 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 3 people who used the service and received feedback from 9 family members about their experience of the care provided to their loved ones. We spoke with 6 members of staff including the director, registered manager, coordinator, and support staff. We received feedback from 11 care staff. We reviewed 3 people's care files and 2 staff files. We also reviewed training records, audits, and quality assurance records.



## Is the service safe?

## Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm.

At our last inspection we rated this key question good. The rating for this key question has remained good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from abuse

- People were kept safe by the staff team who supported them.
- Staff had completed safeguarding training. They were aware of different types of abuse.
- Care staff had the skills to identify possible abuse and take appropriate action by reporting any concerns to the registered manager without delay.

Assessing risk, safety monitoring and management

- People had individual risk assessments completed.
- This included environmental, moving and handling, medicines, and fire safety. Risk are assessed relating to their individual support plans for example wash and or bathing, and mobility.
- Any risks identified were recorded in people's care plan, with measures in place to help reduce the risk of harm.
- This information informed staff how to support people safely.

#### Staffing and recruitment

- Staff were recruited using robust recruitment and selection processes.
- A disclosure and barring checks, along with professional references were taken up in advance of staff commencing work at the service.
- There were enough staff on duty to help support people at the agreed times.
- Staff with the right skills and experience were allocated to work together as a team.
- New care packages would only be accepted if there was enough staff with capacity to support people at their preferred times.

#### Using medicines safely

- People were supported to take their medicines at the prescribed times
- Staff had completed administration of medicines training and had their competencies checked on a regular basis.
- This ensured staff had the right skills and experience to assist people to take their medicines safely.
- There was a process in place in the event of a medication error. This would be fully investigated and any learning shared.

#### Preventing and controlling infection

• People were protected from the risk and spread of infection by staff who had been trained in infection prevention and control.

- Staff were provided with personal protective equipment [PPE] and effective hand hygiene standards and hand sanitizer.
- Guidance was provided to ensure staff were following current guidance.
- The management team had an updated the COVID -19 action plan to ensure this was in line with the latest government guidance in the event of COVID-19 or infection outbreaks.

#### Lessons learnt

- Accidents, incidents and events were reviewed and monitored to see if there was any learning to be shared with all staff.
- This helped to identify trends for example, the days, dates, and times of events happening and reduce the risk of a re-occurrence.

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. In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS).

We checked whether the service was working within the principles of the MCA, whether appropriate legal authorisations were in place when needed to deprive a person of their liberty, and whether any conditions relating to those authorisations were being met.

- The registered manager was aware of MCA guidance
- People who were identified as not having reliable or full capacity had a MCA assessment completed to determine how best to support them



## Is the service well-led?

## Our findings

Well Led - This means we looked for evidence that the service leadership management and governance assured high-quality, person-centred care; supported learning and innovation; and promoted an open and fair culture.

At our last inspection we rated this key question good. At this inspection the rating has remained good. The provider and registered manager had established robust quality assurance systems. This included quality monitoring spot checks and completion of surveys at regular intervals.

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

- The systems and processes were well established to ensure a consistent approach, identify any risks and keep updated relating to the regulations and legal requirements.
- The management and staff team were committed to a culture that achieved good outcomes for people being supported by Reagle home care.
- Feedback from people was overwhelming positive One family member told us "The service we have received has been impeccable and exemplary. The carers are extremely compassionate and caring whilst supporting my family member".
- •The registered manager and hands on directors demonstrated a clear strategic vision for the service.
- •There was robust management oversight,

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

- People were at the heart of everything the service aspired to be.
- A family member told us " They staff, and management are wonderful, my family member always enjoys having a chat".
- People were empowered to be in control or their lives. They were supported and enabled to retain everyday living skills.
- •The management team promoted a culture that was open, honest and transparent.

How the provider understands and acts on the duty of Candour which is their legal responsibility to be open and honest with people when things go wrong

- •The registered manager was aware of the requirement to report any accident, incidents or events that happen under their duty of Candour responsibilities.
- •There had not been any duty of Candour reportable incidents since the last inspection.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

• People who used the service and family members were all positive about the level of engagement and the effective and timely communication of the team.

- Staff were engaged in all aspects of the service. Communication with staff was good and staff told us they felt well supported in their roles. People's individual religion, culture and or protected characteristics were respected.
- There were regular staff meeting and interactions in the service users' home, for example when completing quality assurance checks.
- Staff feedback was very positive. Staff told us they enjoyed working for Reagle and felt well supported and valued.

#### Continuous learning and improving care

- A forward-thinking organisation that is always working towards improving, upgrading and migration before systems and processes became obsolete.
- The management team had robust systems in place to capture information about the entire activity of the organisation.
- Where improvements can be made they are made for example, the migration of care plans to the digital platform.
- Monitoring of care worker punctuality and the delivery of high quality care.

#### Working in partnerships with others

- The service has forged links with many professional involved in providing a service to their service users this included commissioners, GP's district nurses to name just a few.
- The service worked in partnership with opticians and other services, to achieve a holistic approach.