

Remaj Care Recruitment Services Limited

Remaj Care

Inspection report

7 Chatfield Way
Basildon
SS13 2BN

Date of inspection visit:
29 June 2022
30 June 2022

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21 July 2022

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

Remaj Care is a domiciliary care agency providing personal care and support to people living in their own houses and flats. At the time of our inspection there was one person using the service.

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

There were systems in place to monitor the quality and safety of the service. However, at the time of our inspection, these had not been implemented. The registered manager recognised checks needed to be undertaken to monitor the quality and safety of the service. We have made a recommendation about quality assurance management.

Risks to the person had been identified and management plans put in place to ensure staff knew how to support them. However, not all risks associated with the person's care and support and health conditions had been formally recorded. We have made a recommendation about the assessment and recording of risks.

People were kept safe from abuse and harm. Staff received safeguarding training and knew how to report any suspicions concerning abuse.

There was enough staff to meet the needs of the person. Relevant checks had been completed to ensure only suitable staff were employed.

Staff had not received formal one to one supervision or observations of their practice which helps providers to monitor staff performance and identify any learning needs. However, staff felt valued and well supported by the registered manager. We have made a recommendation about staff supervision and observations of staff practice.

Staff who supported the person knew them well. Feedback we received confirmed the person and their relative were happy with the staff that supported them. The person's privacy and dignity were respected, and they were encouraged to make choices and to maintain their independence.

The person's care plan had been developed in partnership with the person and their relative. However, the care plan did not always contain enough information and guidance to support staff to provide individualised person-centred care.

People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible and in their best interests; the policies and systems in the service supported this practice.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk

Rating at last inspection

This service was registered with us on 9 October 2018 and this is the first inspection.

Why we inspected

This was a planned inspection based on the length of time the service was registered and when they commenced providing a regulated activity.

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.

Remaj Care

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 two inspectors.

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 a short period notice of the inspection to enable us to collate as much information as possible virtually to minimise the time spent by the inspection team visiting the provider's office.

Inspection activity started on 20 June 2022 and ended on 6 July 2022. We visited the office location on 30 June 2022.

What we did before the inspection

We reviewed information we held about the service. The provider was not asked to complete a Provider

Information Return (PIR) prior to this inspection. A PIR is information providers send us to give some key information about the service, what the service does well and improvements they plan to make. We used all this information to plan our inspection.

During the inspection

We spoke with one relative about their experience of the care provided. We spoke with three members of staff including the registered manager and care staff.

We reviewed a range of records. This included one person's care records and staff training. We looked at two staff files in relation to recruitment, induction and staff supervision. A variety of records relating to the management of the service, including policies and procedures were reviewed.

Is the service safe?

Our findings

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

This is the first inspection of this newly registered service. This key question has been rated good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- Systems were in place to safeguard people from the risk of abuse. This included safeguarding adults, children and whistleblowing procedures.
- Staff had received safeguarding training and were aware of the actions they needed to take if they witnessed or suspected people were at risk of abuse. One member of staff told us, "I would report [concerns] to my manager. I would call the local authority safeguarding line if my concerns were not listened to." A relative told us, "I feel [person] is safe when staff are in the house 100%."
- The registered manager was aware of their responsibilities on how to raise safeguard alerts.
- No safeguarding alerts had been raised since the service had become operational.

Assessing risk, safety monitoring and management

- The person using the service had relatively low needs and lived with family members.
- Risks to the person had been identified and management plans put in place to ensure staff knew how to support them. However, although staff were informed, not all risks associated with the person's care and support and health conditions had been formally assessed and recorded. We discussed this with the registered manager who told us they would take immediate steps to ensure the person's care records were updated. The registered manager subsequently sent through an updated care plan; however, this did not fully document the person's needs and associated risks.

We recommend the provider seek advice and guidance from a reputable source, about assessing and recording of risk.

Staffing and recruitment

- There were enough staff to support people and there had been no late or missed care call visits. A relative told us, "We have the same two carers. They are always on time and sometimes [person] keeps them slightly longer but they don't mind. They have been so kind and accommodated this."
- Staff recruitment processes were in place to ensure staff were suitable to work with people who used the service. However, no formal interview notes were available in staff files. We discussed this with the registered manager who advised they had been mislaid. We were therefore unable to explore what process the provider followed when interviewing staff, for example the discussion which had taken place as part of the interview process and the rationale for staff's appointment.
- Staff files did contain evidence of recruitment checks which were carried out prior to staff starting work. These checks included obtaining staff's employment histories, obtaining references and a Disclosure and Barring (DBS) check. A DBS check provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.

Using medicines safely

- At the time of our inspection, staff were not supporting the person with the administration of their medicine.
- The registered manager did have a medication administration record (MAR) in place for the person using the service. This was used by staff who, when required, signed to record they had seen the person take their medicines when prompted for monitoring purposes.
- The provider had a medicine policy in place and staff had received training. The registered manager informed us they would ensure staff had refresher training and their competencies checked should a person require support with the administration of medicine.

Preventing and controlling infection

- Staff took appropriate measures to protect themselves and people from the risk of infection. They had completed training in infection control and understood their responsibilities to prevent the spread of infection.
- Staff had access to enough supplies of personal protective equipment (PPE).

Learning lessons when things go wrong

- The provider had systems in place to record and analyse incidents and accidents. The registered manager informed us there had been no incidents or accidents since the service had become operational. They told us reflective practice would take place with all staff to learn from any incidents and to mitigate the risk of reoccurrence.

Is the service effective?

Our findings

Effective – this means we looked for evidence that people's care, treatment and support achieved good outcomes and promoted a good quality of life, based on best available evidence.

This is the first inspection for this newly registered service. This key question has been rated good. This meant people's outcomes were consistently good, and people's feedback confirmed this.

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

- The person's care and support needs had been assessed prior to the commencement of their care package. This was to ensure the service could meet the needs of the person.
- The person's equality and diversity needs were identified and recorded.

Staff support: induction, training, skills and experience

- The provider's formal staff induction programme had not been completed for members of staff, however staff confirmed they had received an induction and training to enable them to fulfil their role and responsibilities.
- Newly appointed staff completed the Care Certificate. The Care Certificate is an agreed set of standards that define the knowledge, skills and behaviours expected of specific job roles in the health and social care sectors. It is made up of the 15 minimum standards that should form part of a robust induction programme.
- Although staff told us they received good support from the registered manager who was always available for advice and guidance, no formal one to one supervision with staff had been recorded. Furthermore, no formal observation of staff practice had been undertaken by the registered manager.

We recommend the provider ensures staff supervision forms and all observational supervisions are recorded as evidence of senior management oversight.

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

- The person using the service did not have any specific dietary needs.
- Their relative told us staff supported them as needed with the provision of meals and drinks throughout the day to ensure their nutritional and hydration needs were met.
- Staff had received training relating to food safety to ensure their practice was appropriate and safe.

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

- Staff informed the person's relative if they had any concerns regarding the person's health. The relative told us, "They [staff] highlighted [person's] legs were slightly swollen so I contacted the GP." However, this action was not formally recorded in care records. We discussed this with the registered manager who advised us they would record this information going forward.
- The registered manager informed us they would work with other agencies to ensure people received effective care and support to ensure their health and wellbeing.

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.

- Staff were aware of the importance of seeking consent from the person they supported.
- Staff had received MCA training and understood how this applied to their roles.
- The registered manager understood the principles of the MCA and acting in people's best interest.

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

- The person using the service received kind and compassionate care. A relative said, "We are very pleased with the two staff. They are very kind and caring and know [person] well. [Staff] have bonded well and [person] can relate to them. Staff seem interested in them."
- Staff received equality and diversity training. The registered manager told us they aimed to provide a service whereby people's care and support was provided in a way which respected and supported individuals' diverse needs and wishes.

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

- The person and their relative had been involved about decisions regarding their care. The relative told us, "Initially we had an assessment with a social worker then with Remaj Care who came to do an assessment and identified the care and practically what needed to be done. We were both fully involved in the process. We agreed the contents of the care plan. The manager will be reviewing the plan."
- Staff were knowledgeable about the needs and wishes of the person they supported. They described how they supported and encouraged the person to make decisions about their care such as offering different choices of clothing.
- There was opportunity to provide feedback about the service when care plans were reviewed. The provider had drafted satisfaction surveys to gain people's and relative's feedback; however, these had not yet been sent out as the service had only been operational since March 2022. The registered manager informed us these would be sent out annually.

Respecting and promoting people's privacy, dignity and independence

- The relative told us their family member was always treated with respect and dignity.
- Staff ensured the person's privacy and dignity was always maintained; for example, by making sure personal care was undertaken in private, closing doors and using towels to hide the person's modesty.
- Importance was placed by staff to encourage the person to maintain their independence and do as much as they could for themselves. The person's relative told us, "[Staff] support [person] to do things and to be safe. They have struck a good balance and encourage them to do the best they can. [Person] is sticking by them; usually they are resistant as fiercely independent, and it has taken a long time for them to accept help and now they can't sing their [staff] praises enough and looks forward to seeing them. That's so very reassuring for me."

Is the service responsive?

Our findings

Responsive – this means we looked for evidence that the service met people's needs.

This is the first inspection for this newly registered service. This key question has been rated good. This meant people's needs were met through good organisation and delivery.

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

- The relative of the person using the service told us they had been involved, together with their family member, in the planning and review of the person's care. They said, "[The care plan] has all the information in it and the care plan has been reviewed and the revision captured the correct details." However, we noted aspects of the care plan lacked meaningful information and guidance about the person's preferences and routines. This information helps staff to provide care which is person centred. We discussed our findings with the registered manager who told us they would review the person's care plan to include more detailed and personalised information to ensure it reflected a person-centred approach.
- Staff were knowledgeable and had a good understanding of the person's care and support needs. They confirmed they had sight of the person's care plan prior to providing care.

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.

- The person's communication needs were identified within their initial assessment.
- The registered manager informed us no one would be discriminated from accessing the service and, where required, information would be provided in other formats to meet individual needs.

Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities that are socially and culturally relevant to them

- Staff supported the person to take part in activities which were meaningful to them and where this was part of their plan of care.

Improving care quality in response to complaints or concerns

- Information on how to raise a complaint was contained in the provider's 'service user's guide'.
- The registered manager told us the service had received no complaints since the service was registered.
- The relative told us they felt confident any concerns would be listened to and acted upon by the registered manager.

End of life care and support

- At the time of our inspection no one was receiving end of life care.

- The registered manager told us staff would work with healthcare professionals to support people with end of life care support.

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

- The provider had systems and processes in place to monitor the quality and safety of the service and drive improvements however these had not been implemented. For example, no formal audits of observation of staff practice or checks of care records had been completed.
- We discussed with the registered manager the need to have a robust quality assurance system which would need to be in place if the service was to expand their care packages and staff team.

We recommend the provider review their systems and processes for quality assurance and monitoring of staff performance to ensure more robust oversight of the service.

- The registered manager understood about the different kind of events they were required to notify CQC about.
- Systems were in place to investigate and feedback on incidents, accidents and complaints.

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

- The person using the service and their relative were involved in care planning and the relative spoke positively about the care their loved one received. They told us, "I would definitely recommend the service to others if they needed help."
- Staff were complimentary about the registered manager, and told us they were approachable, caring and supportive. One member of staff said, "[Registered manager] is very supportive and if needed they will drop everything and have a meeting with you. If you need training, [registered manager] will sort it out for you. It is pleasant working with them, and I get the right support I need for the job."

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 registered manager understood the duty of candour and their duty to be open and honest about any incident which caused or placed people at risk of harm.

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

- The registered manager told us informal feedback would be welcomed from people, relatives and staff to

help drive improvements.

- No formal questionnaires had been undertaken as the service had only been operational since March 2022. The registered manager advised us these would be conducted on an annual basis and confirmed an analysis would be undertaken of responses and, where necessary, action plans put in place
- Staff felt valued and involved in the day to day running of the service. One member of staff said, "We are able to put views forward to [registered manager]. We discuss the client and relate what we are encountering on the field. We have an open conversation, can ask questions and [registered manager] will put forward suggestions."

Continuous learning and improving care; Working in partnership with others

- The registered manager told us they would work with health and social care professionals when needed to ensure people's needs were met.
- The registered manager was committed to providing a good quality service. They said, "I love caring [for people] and to do it successfully and see them getting better. I want to progress the service and will develop relationships with other professionals as the service grows."