

Royle Care Limited

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Inspection report

The Annex
121 London Street
Reading
Berkshire
RG1 4QA

Tel: 01189577460
Website: www.roylecare.co.uk

Date of inspection visit:
13 January 2021

Date of publication:
05 February 2021

Ratings

Overall rating for this service

Inspected but not rated

Is the service effective?

Inspected but not rated

Summary of findings

Overall summary

About the service:

Royle Care Limited is a domiciliary care agency which provides personal care and support to people living in their own homes. At the time of the inspection there were 77 people receiving personal care from 48 staff.

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

We received information about concerns regarding staff not completing the required training to carry out their role. We contacted the provider and asked for information about staff training including information about how they ensured staff were trained to meet people's specific needs. This included the provider's staff training matrix, staff supervision and competency records and people's care plans. We visited the provider's office to speak with the registered manager. We found people received care from suitably skilled staff who had completed the relevant training.

Rating at last inspection

The last rating for this service was Good (published 3 May 2019)

Why we inspected

We undertook this targeted inspection to follow up on specific concerns which we had received about the service. The inspection was prompted in response to concerns received about staff training. A decision was made for us to inspect and examine those risks. The overall rating for the service has not changed following this targeted inspection and remains Good.

CQC have introduced targeted inspections to follow up on Warning Notices or to check specific concerns. They do not look at an entire key question, only the part of the key question we are specifically concerned about. Targeted inspections do not change the rating from the previous inspection. This is because they do not assess all areas of a key question. We found no evidence during this inspection that people were at risk of harm from these concerns.

Follow up

We will continue to monitor information we receive about the service until we return to visit as per our re-inspection programme. If we receive any concerning information we may inspect sooner.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service effective?

Inspected but not rated

Inspected but not rated

Royle Care Limited

Detailed findings

Background to this inspection

This was a targeted inspection to check whether the provider had met the requirements of the specific concern we had about staff training.

We will assess all of the key question at the next comprehensive inspection of the service.

Inspection team

This inspection was undertaken by one inspector and an Expert by Experience. An Expert by Experience is a person who has personal experience of using or caring for someone who uses this type of care service.

Service and service type

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

The service had a manager registered with the Care Quality Commission. 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.

Notice of inspection

This inspection was announced. We gave the service one short notice of the inspection site visit because we needed to be sure arrangements could be made to meet with key staff and to speak with people who use the service. Inspection activity started on 4 January 2021 and ended on 13 January 2021. We visited the office location on 13 January 2021.

What we did before inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority. We did not receive a response. The provider was not asked to complete a provider information return prior to this inspection. 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. We took this into account when we inspected the service and made the judgements in this report.

During the inspection

We spoke with seven members of staff including the registered manager and six care staff. We also spoke

with eight people who used the service and 11 people's relatives.

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.

We have not changed the rating of this key question, as we have only looked at the part of the key question we had specific concerns about.

The purpose of this inspection was to explore the specific concerns we had about staff training. We will assess all of the key question at the next comprehensive inspection of the service.

Staff support: induction, training, skills and experience

- The registered manager ensured staff completed the required training to support people's needs.
- Staff completed a comprehensive induction which was based on the Care Certificate, which is a set of national standards for care workers. Staff also completed practical training in use of specialist equipment such as hoists.
- Staff also shadowed experienced colleagues before working independently. This helped new staff to gain the skills to support people effectively.
- The registered manager supported and encouraged staff to gain additional qualifications. Several staff were completing National Vocational Qualifications (NVQs) in Health and Social Care.
- Senior staff completed regular 'spot checks' on staff to monitor quality in the service and identify any staff who needed additional training or support. One staff member said "I've had two spot checks...I was met by two different senior carers...they were really good, they were completely supportive."
- Staff had completed training to support people with more complex needs, such as people who received food and medicines through a Percutaneous Endoscopic Gastrostomy (PEG). The registered manager had organised training with a specialist nurse to ensure staff were suitably qualified to support people with a PEG.
- Care plans contained clear instructions for staff about how to safely give food, water and medicines through people's PEGs.
- Staff received regular supervisions and appraisals and were encouraged to seek any required support.
- Staff told us they felt well supported by their managers and colleagues and that they felt comfortable requesting additional training or support.