

Redhouse Care Team Limited

# Redhouse Care Team Limited - 64 Marsland Road

## Inspection report

64 Marsland Road  
Sale  
Greater Manchester  
M33 3HG

Tel: 01613740955

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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 announced inspection was undertaken on Friday 28 October 2016. The inspection was announced to ensure it could be facilitated on that day by the registered manager. We last inspected Red House Care Team in December 2013, where the service was judged to be meeting the standards assessed at that time.

Redhouse Care Ltd is a domiciliary care agency registered with the Care Quality Commission to provide personal care to people living in their own homes. The service also provides assistance with domestic tasks such as cleaning and shopping. The agency is based in Sale, south Manchester. The service provides care to people who require assistance with tasks such as bathing or having a shower. At the time of our inspection the service provided care and support to seven people with personal care, whilst also employing three members of staff.

There was a registered manager in post. 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.

The people we spoke with told us they felt safe. The staff we spoke with had a good understanding about safeguarding and whistleblowing procedures and told us they wouldn't hesitate to report concerns.

At the time our inspection, the service did not provide care and support to people with regards to the administration of medication. The manager said they didn't accept care packages if this was something people needed assistance with. As such, this area was not covered during the inspection.

We found there were sufficient staff to care for people safely. Staff spoken with didn't raise any concerns about staffing numbers, with people who used the service telling us staff always turned up on time.

We saw staff were recruited safely, with appropriate checks undertaken before they began working with vulnerable adults. This included ensuring DBS/CRB (Disclosure Barring Service/Criminal Records Bureau) checks were undertaken and references from previous employers sought.

The staff we spoke with told us they had access to sufficient training and received supervision as part of their ongoing development. The registered manager was a 'Train the trainer' and a registered nurse and regularly disseminated their skills and knowledge to staff.

At the time our inspection, the service did not provide care and support to people with regards to nutrition and hydration intake, with people telling us this was something they could manage themselves. As such, this area was not required to be considered during the inspection.

The people we spoke with told us they were happy with the care provided by the service. People told us staff

treated them with dignity and respect and promoted their independence as much as possible.

Each person who used the service had a care plan in place and we saw a copy was kept in the person's home and at the office. The care plans provided an overview of each person's care needs and were updated when things changed. The people we spoke with also said an initial assessment was undertaken, when they first started using the service.

The service sent satisfaction questionnaires to people, asking for their comments about the service. This enabled the service to continually improve based on feedback from people and anything that could be changed.

There was a complaint procedure in place, although the manager told us there had been no complaints made about the service. The people we spoke with were aware of how to make a complaint where necessary.

People who used the service and staff told us they felt the service was well managed. Staff told us they felt well supported and would feel comfortable raising and discussing concerns.

We saw there were systems in place to monitor the quality of service provided. This was done in the form of spot checks and observations of staff undertaking their work. Staff also had access to policies and procedures if they needed to seek guidance in a particular area.

## 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.

The people we spoke with told us they felt safe as a result of the care they received.

Staff were recruited safely, with appropriate checks undertaken.

The service had carried out a range of risk assessments in people's houses to help keep people safe.

### Is the service effective?

Good 

The service was effective.

We found staff had received training in core topics and staff told us they felt supported to undertake their work

Staff told us they received supervision as part of their ongoing development.

People told us staff sought consent before providing care.

### Is the service caring?

Good 

The service was caring.

The people we spoke with told us they were happy with the care and support provided by staff

People told us they were treated with dignity and respect and were allowed privacy at the times they needed it.

People said they were offered choice by staff, who promoted their independence where possible.

### Is the service responsive?

Good 

The service was responsive.

We saw initial assessments were completed when people first started using the service, with appropriate care plans

implemented thereafter.

There was a complaints procedure in place, allowing people to state if they were unhappy with the service.

The service had sent satisfaction surveys, seeking people's views about the service.

**Is the service well-led?**

**Good** ●

The service was well-led.

The service conducted spot checks and observations of staff undertaking their work.

People who used the service and staff told us they felt the service was well-led.

We saw team meetings and management meetings were undertaken to discuss work and concerns.

# Redhouse Care Team Limited - 64 Marsland Road

## **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 was meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, and to provide a rating for the service under the Care Act 2014.

This announced inspection was carried out on Friday 28th October 2016. The inspection was announced to ensure our inspection could be facilitated on that day by the registered manager. The inspection team consisted of an adult social care inspector from the Care Quality Commission (CQC).

Before the inspection we reviewed any information we held about the service in the form of notifications received from the service. We also reviewed any safeguarding or whistleblowing information we had received, previous inspection reports and any complaints about the service. This helped us determine if there might be any specific areas to focus on during the inspection, based on information we had received.

At the time of the inspection the service provided care and support to seven people with personal care within their own homes, predominantly in the Sale, Urmston and Stretford areas of Manchester. As part of the inspection we spoke with the registered manager, two members of staff, two people who used the service and three relatives. This was to seek feedback about the service provided from a range of different people and help inform our inspection judgements.

We attempted to contact Trafford Council quality assurance team in advance of our inspection, but did not receive a response prior to undertaking our visit.

We also viewed three care plans, three staff personnel files, three supervision/observation records, policies and procedures and other documentation relating to the running of the service, such as satisfaction surveys, to help inform our judgements.

# Is the service safe?

## Our findings

People we spoke with told us they felt safe as a result of the care they received. One person said to us; "I have no concerns about my safety. They hold me in the shower so that I don't fall". Another person said; "I feel quite safe when the staff are here. It makes me feel better knowing they are there and gives me extra reassurance".

Whilst speaking with relatives, they also commented that they felt their family members were safe when receiving care from the service. One relative said; "Yes absolutely. We feel totally safe with the staff and it makes me feel relaxed". Another relative added; "Definitely. We trust the staff very much".

During the inspection we spoke with staff and asked them about their understanding of safeguarding vulnerable adults and whistleblowing. We saw there was an appropriate policy and procedure available for staff to refer to, if staff needed to seek assistance or advice. Each member of staff could clearly describe the process they would follow if they had concerns about people's safety. One member of staff said; "Bruising would be an example of physical abuse. I've never had to report anything, but if it did I would be straight on the phone to my manager".

People were protected against the risks of abuse because the service had a robust recruitment procedure in place. Appropriate checks were carried out before staff began working at the service to ensure they were fit to work with vulnerable adults. During the inspection we looked at three staff personnel files. Each file we looked at contained application forms, CRB/DBS (Criminal Records Bureau/Disclosure Barring Service) checks and evidence of references being sought from previous employers. These had been obtained before staff started working for the service and evidenced to us staff had been recruited safely.

We found there were sufficient numbers of staff working for the service. At the time of the inspection, the service employed three regular members of staff. This was to provide care and support to seven people. The service provided assistance to people, mainly related to helping to have a shower or a bath and this formed the main part of the care package. The staff we spoke with felt there were sufficient staff working for the service, with enough staff available to care for people safely. One member of staff said; "We are only a very small company, but there is always sufficient cover provided between us". Another member of staff added; "I don't have any problems at all and it seems to be working well. We never struggle to meet people's needs".

The people we spoke with told us they had never experienced any missed visits since using the service and they were always contacted if staff were going to arrive at different times. One person said; "In the past, if staff haven't been able to make it, they have always been very good at letting me know what is going on. They seem very punctual". Another person said; "They are always on time and seem to be very prompt".

We found people had various risk assessments in place to keep them safe within their own home. These covered areas such as the home environment, moving and handling, both internal and external areas of the home and areas relating to each person such as if there was a threat of violence, verbal abuse or if there was the risk of any unpredictable behaviour. We saw there were control measures in place such as keeping

walkways and corridors clear and clutter free and ensuring that where necessary, people were assisted with transfers by a member of staff. We saw these were updated each year, or when there was a change in people's circumstances or their safety. The registered manager told us that at the time of the inspection, there had been no recorded near misses or accidents or incidents within the service.

At the time our inspection, the service did not provide care and support to people with regards to the administration of medication. The manager said they didn't accept care packages if this was something people needed assistance with. As such, this area was not required to be considered during the inspection.



## Is the service effective?

### Our findings

The people we spoke with told us staff were good at their jobs and felt they provided effective care. One person said; "The member of staff who comes in to see me has been doing the job for a long while and really seems to know what she is doing". Another person said; "Definitely. The staff know exactly what they are doing and seem to enjoy their job".

There was a staff induction programme in place, which staff were expected to complete when they first began working for the service. The induction covered areas such as understanding the principles of care, the organisation and role of the worker, experiences and needs of the client group and safety at work. These sections of the induction also took into account core areas of the role such as safeguarding, infection control, confidentiality, communication, fire and health and safety. The staff working for the service had been employed at Redhouse for many years and said that the induction was completed a long time ago. The manager also told us they had not employed any new staff on since the previous inspection in 2013. The staff we spoke with said an induction was provided at the time and that it gave them good insight into working for the company.

The staff we spoke with told us they received sufficient training and support in order to undertake their work effectively. We saw staff had received training in areas such as moving and handling, first aid, safeguarding, Deprivation of Liberty Safeguards (DoLS), dementia awareness and first aid. The registered manager was a 'Train the trainer' and a registered nurse and regularly disseminated their skills and knowledge to staff. At the time of the inspection, there was no training matrix in place. The manager told us they would introduce this following the inspection to provide a clear overview of training undertaken by staff. One member of staff said; "I've worked in care for 30 years and don't have a problem with the training here. We've recently done mental capacity, DoLS and dementia. The training is fine and they seem to keep on top of it". Another member of staff said; ""They keep on top of all the training and supervision really well. We only provide basis care to people and for that, we get enough".

We found staff received supervision as part of their on-going development. Staff supervision enables managers to speak with staff about their work in a confidential setting and discuss how things are progressing to date. We looked at a sample of these records and saw these provided a focus on a review of performance, future work targets, training and development, personal needs and any other areas for discussion affecting the role. The manager told us both supervisions and staff observations were done at the same time. One member of staff said; "We always have them and they seem to be about every six months. Both the supervision and observations are done together which makes sense". Another member of staff added; "They are a common thing. We can talk about work and raise any concerns".

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.

At the time of the inspection, there was nobody using the service who was subject to a Deprivation of Liberty Safeguards (DoLS), although the staff we spoke with said training had recently been provided in this area. One member of staff said, "Deprivation of Liberty is about people having the freedom to make their own choices and decisions. If a person was lacking in this area a DoLS request could be needed." Another member of staff said, "We have done training recently and I understand DoLS to be about ensuring everybody has the capacity to make decisions and that they are protected as a result."

The people we spoke with told us before receiving care and support staff always asked them for their consent. Staff were also able to describe how they sought consent from people before delivering care. Each person's care plan also contained sign contract agreements, stating they were happy for the care package to commence as planned. One person said, "They always ask me everything. Even little things such as checking the water temperature is correct." Another person said, "The care I receive is always based on what I want." A member of staff also told us, "People have the right to say how they want things and I would never just go in and take over. It's important to offer people choice all of the time."

At the time our inspection, the service did not provide care and support to people with regards to nutrition and hydration intake, with people telling us this was something they could manage themselves. The manager said they didn't accept care packages if this was something people needed assistance with. As such, this area was not required to be considered during the inspection.

## Is the service caring?

### Our findings

We were told by the manager that Redhouse Care Team was a family run business with a strong emphasis on delivering person centred care which had been operating for over 20 years. The manager said calls to people using the service were a minimum of an hour and they did not accept care packages from the local authority if the time allocated was less than this. Staff told us this allowed them to spend a good amount of quality time with people and for caring relationships to develop.

The people who used the service told us they were happy with the care and support they received. One person said to us; "I've been receiving care from Redhouse now for about seven years and I think they are very good". Another person said; "They are very good indeed and very caring".

People who used the service spoke favourably about the staff who cared for them. People told us they found the staff to be kind and caring. One person said; "The member of staff who comes into see me is a lovely person. She is a gem and really looks after me. I don't want her to ever leave. I wouldn't change my carer for the world". Another person added; "The member of staff who helps me to have a shower is very caring and they treat me very nicely".

The relatives we spoke with also felt the service provided a good level of care and support. One relative said; "It's very good. My mum feels relaxed and all of the staff are very professional. The staff are very good and they have developed a good relationship. The staff are outstanding". Another relative added; "I think they are very good. The staff are smashing and they are very good at keeping me up to date with things". A third relative also told us; "Everything is fine and our family member really enjoys the company. It's working very well and overall they are providing a good level of care".

We asked people who used the service and relatives if they felt they were treated with dignity and respect by staff who cared for them. One person said; "Yes they do. The staff who come in treat me very nicely". Another person said; "I'm offered a towel when I get out of the shower and I feel that preserves my dignity". A relative also added; "My mum is absolutely treated with dignity and respect". Staff were also able to describe how they aimed to do this when delivering care to people. A member of staff also commented; "I feel it's quite a big deal when seeing people without their clothes so dignity must be preserved. I'll cover people with a towel when washing their top half and visa versa". Another member of staff added; "Dignity and respect is the top of my list when delivering care. It's important to offer people choice which shows respect".

People told us staff tried to promote their independence as much as possible. Staff were also able to describe how they aimed to do this when delivering care to people. One person told us; "The member of staff gets the shower ready for me but lets me chip in and do bits and pieces myself". Another person said; "I like to tell the staff I can do bits for myself but it's re-assuring having the staff there to hold onto". A member of staff also told us; "If people are capable then let them. One person in particular is capable of washing their face with a flannel so I let them". Another member of staff said; "I like to discuss with people what they want. I let people do things for themselves but be there to assist if necessary".

Everybody we spoke with told us there was good continuity in care between staff and people who used the service. People told us this allowed for caring relationships to develop. A relative told us; "It's always the same staff that come in and that allows for consistency and allows for a strong bond to be developed and it makes a difference". Another relative added; "I've noticed the continuity is very good and it's always the same member of staff which I know my relative really appreciates. She always seems to smile when the staff come in".

## Is the service responsive?

### Our findings

The people we spoke with and their relatives told us they felt the service was responsive to their needs. One person said; "They are providing me with everything that I need definitely. I would not have stayed with them for this long if I was completely satisfied". Another person said; "Definitely. I am getting everything I need from the service. They are all very good and I would like to continue using the service. If I need anything, it's there". A relative also told us; "The package is only for staff to come in and do a strip wash. As far as I can see they are doing everything I should". Another relative said; "Overall we are very satisfied with everything that is being provided".

People and their relatives told us they found the service was flexible and responsive in changing the times of their visits when required. For example, where appointments had been arranged and conflicted with home visit times. The rotas were planned in advance and reviewed, therefore the service was able to be responsive to meet changes when necessary.

We saw that before people's care package commenced, the service carried out an assessment of people's needs. This was usually done when receiving a referral from the local authority, which would then be followed up by the service conducting an assessment in people's own homes. The initial assessment would allow staff to establish what people's care needs were and how staff needed to care for them. We looked at the initial assessments which had been completed and saw they took into account information about medication, religion, care requirements, allergies, current relative involvement, continence, mobility, next of kin information and emergency contact details. One person said; "When I first started using the service, staff came to see me to do an assessment".

Each person who used the service had their own care plan. These were kept at the office, with a copy also available in people's houses for staff to refer to. During the inspection we looked at the care plans of three people who used the service. At the time of the inspection, the only assistance staff provided to people was to have a shower or assist with a strip wash. The care plans we looked at contained an overview of people's care needs and the type of assistance staff needed to provide such as how many visits were needed each week, how to access the building, what the agreed outcomes of the care package were, how to prepare the bathroom, any paperwork to be completed and how to safely leave the property when the care had been delivered.

We looked at the most recent satisfaction surveys sent to people who used the service. We saw people were asked for their views and opinions about if they were happy with the service they received, if they felt rushed, if they were happy with staff, knowing how to contact the office and suggestions about how the service could be improved. People's care needs were also reviewed when necessary. This provided the opportunity for people to be involved with their care and support and make changes or suggestions where necessary.

There was a complaints policy and procedure in place. This clearly explained the process people could follow if they were unhappy with aspects of their care. At the time of the inspection, the manager told us there had been no complaints made against the service. The people we spoke were aware of the complaints

process and how they would report concerns. One person said; "Initially I wasn't happy the member of staff I had. I let them know about it and it was sorted straight away so that member of staff didn't come again".

# Is the service well-led?

## Our findings

There was a registered manager in post. 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.

The staff we spoke with told they enjoyed their work and that Redhouse Care Team were good to work for. Staff also felt there was a good culture within the service. One member of staff said; "I've never had a problem since working here and they have always been there for me. I've been very happy working for them and love all of the clients we have". Another member of staff said; "I've have always found them alright to work for. We are only a small company, but I feel we have a very good rapport with all of the families".

The staff we spoke with felt the service was well – led and managed. One member of staff said; "I would feel comfortable speaking with the managers about anything. I feel I could let them know about anything and it would get sorted". Another member of staff said; "They are really good and we have a very good team. I find it really easy to approach them about anything". People who used the service and relatives spoke favourably about how the service was managed. One person said; "I first met the manager when she came out to do my assessment. They all seem fine and have been very good". A relative also commented; "They ring us up every week just to confirm when the visits are going to be which I find good. They confirm it by email as well".

We found there were systems in place to monitor the quality of service within people's homes. This was done through regular spot checks and observations of staff undertaking their work. This provided the opportunity for managers to see how staff worked and offer suggestion as to how things could be improved in order to monitor the quality of service. The manager told us both supervisions and staff observations were done at the same time. We looked at a sample of these records and saw these provided a focus on a review of performance, future work targets, training and development, personal needs and any other areas for discussion effecting the role. A member of staff told; "I have my observation and supervision at the same time. It's a good chance to catch up".

The staff told us that team meetings took place regularly. Team meetings allow for information to be cascaded and for staff to discuss their work and concerns. We saw there were agendas in place, however the minutes were not accurately documented. The manager said they would ensure the discussions of these meetings were captured moving forwards. We noted some of the agenda items discussed included general housekeeping, risk assessments, personal care updates, infection control, safeguarding, timekeeping and communication. The manager said staff 'called in' at the office each Friday and presented the opportunity to discuss things from earlier in the week and if there were any problems. One member of staff said; "We had one quite recently in September. We can raise concerns and I feel listened to about anything I raise".

There were various policies and procedures in place at the service. These covered equality and diversity, complaints, whistleblowing and safeguarding. Staff told us these were covered during induction and were available to look at if they needed to seek advice.

