

Beech Health Limited

Radfield Home Care

Stamford, Peterborough &  
Rutland

### Inspection report

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### Ratings

Overall rating for this service

Outstanding 

Is the service safe?

Good 

Is the service effective?

Good 

Is the service caring?

Outstanding 

Is the service responsive?

Outstanding 

Is the service well-led?

Good 

# Summary of findings

## Overall summary

### About the service:

Radfield Home Care Stamford, Peterborough & Rutland is a domiciliary care service. It is registered to provide personal care to people living in their own homes in the community.

Not everyone who used the service received personal care. The Care Quality Commission (CQC) only inspects where people receive personal care. This is help with tasks related to personal hygiene and eating. Where they do, we also consider any wider social care provided. At the time of our inspection, 15 people were receiving a personal care service.

### People's experience of using this service:

People were at the heart of the service and everyone we spoke with told us of the exceptionally person-centred care they received. One person said, "They take time to get to know me [and] do everything I ask them to. I think I am very fortunate to be with them."

Staff cared for people with exceptional kindness and compassion; went out of their way to promote their welfare and happiness and respected their right to make choices in every aspect of their lives. People were treated with dignity and respect and were supported to maintain their independence for as long as possible.

Staffing resources were organised exceptionally well to provide people with continuity of staffing and safe, consistent care. Staff worked together in a mutually supportive way and communicated effectively with a range of external organisations. Staff recruitment was safe.

Care planning systems were highly effective. Staff understood people's individual care needs and preferences and used this knowledge to provide them with extremely flexible, responsive support. Training and supervision systems provided staff with the knowledge and skills they required to meet people's needs. People received food and drink of their choice and people's medicines were managed safely.

Systems were in place to ensure effective infection prevention and control. Staff worked collaboratively with local health and social care services to ensure people had access to any support they required.

Staff were aware of people's rights under the Mental Capacity Act 2005 and supported people to have maximum choice and control of their lives, in the least restrictive way possible and in their best interests. The policies and systems in the service supported this practice. The provider assessed and managed potential risks to people's safety and welfare. Staff knew how to recognise and report any concerns to keep people safe from harm.

The service was well-led. The owner provided principled, values-based leadership and the registered manager was respected and admired by his team. Staff enjoyed their work and were proud to work for the provider.

A range of audits was in place to monitor the quality and safety of service provision. There was organisational learning from significant events and any complaints were managed effectively. The provider had an innovative approach to service design and delivery and was committed to the continuous improvement of the service in the future.

People and their relatives were engaged in the planning and delivery of their care. Despite the impact of the COVID-19 pandemic, the provider had begun to develop productive links with the local community.

For more details, please see the full report which is on the CQC website at [www.cqc.org.uk](http://www.cqc.org.uk)

Rating at last inspection:

This service was registered with CQC on 11 October 2019 and this is the first inspection.

Why we inspected:

This was a planned inspection following registration.

Follow up:

We will continue to monitor intelligence we receive about the service until we return to visit as per our re-inspection programme. If any concerning information is received, 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 safe?

The service was safe.

Details are in our Safe findings below.

Good 

### Is the service effective?

The service was effective.

Details are in our Effective findings below.

Good 

### Is the service caring?

The service was exceptionally caring.

Details are in our Caring findings below.

Outstanding 

### Is the service responsive?

The service was exceptionally responsive.

Details are in our Responsive findings below.

Outstanding 

### Is the service well-led?

The service was well-led.

Details are in our Well-Led findings below.

Good 

# Radfield Home Care Stamford, Peterborough & Rutland

## **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.

As part of this inspection we looked at the infection control and prevention measures in place. This was conducted so we can understand the preparedness of the service in preventing or managing an infection outbreak and to identify good practice we can share with other services.

#### Inspection team

Our inspection was conducted by an 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

Radfield Home Care Stamford, Peterborough & Rutland is a domiciliary care service, registered to provide personal care to people living in their own homes in the community.

The service had a manager registered with the Care Quality Commission (CQC). This means 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

We gave the service two working days' notice of the inspection visit. This was because we needed to be sure the registered manager would be available to support the inspection.

### What we did before the inspection

In planning our inspection, we reviewed information we had received about the service. This included any notifications (events which happened in the service that the provider is required to tell us about).

### During the inspection

We conducted our inspection between 1 and 9 June 2021.

As part of the inspection we spoke with the registered manager; the owner of the company ('the owner'); two members of the care staff team and 14 service users and relatives.

We reviewed a range of written records including three people's care plan, staff recruitment and training records and information relating to the auditing and monitoring of service provision.

We also reviewed the information in the provider information return, which was submitted to us shortly before the inspection. This is information providers are required to send us with key information about their service, what they do well, and improvements they plan to make. This information helps support our inspections.

# 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 for 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

- The provider had a range of measures in place to help safeguard people from the risk of abuse. For instance, staff had received training in safeguarding procedures and were aware of how to report any concerns relating to people's welfare.
- Everyone we spoke with told us they felt safe using the service. One person said, "I am very happy with ... the care I receive. I feel totally safe."

Staffing and recruitment

- In scheduling people's care calls, the provider took care to ensure staff started each call at the specified time. Almost everyone we spoke with was entirely satisfied with the timeliness of their care calls. For example, one person told us, "The carers are on time. I have no complaints."
- The provider had a minimum call time of 30 minutes which meant staff always had sufficient time to meet people's needs without rushing. One person said, "They always do everything they should. It's very good care." A staff member told us, "We sometimes have 10 or 15 minutes left over [at the end of the call] when we can sit and chat with our clients. There is always a story to be told!"
- To promote the consistency and safety of care provision, the provider went to considerable lengths to ensure people were supported by the same small team of regular staff. One person told us, "I have three regular carers who are all excellent. Everything is perfect."
- Describing his principled approach to staff recruitment, the owner told us, "We set the bar high. We are growing [slowly] in accordance with our ability to recruit [the right people]." We reviewed recent recruitment decisions and saw the necessary checks had been carried out to ensure that the staff employed were suitable to work in the service.

Using medicines safely

- When people needed support to take their medicines, this was provided safely in accordance with their individual needs and preferences. One person told us, "I [mainly] do my own medication but the carers change my [pain relief] patch once a week."
- Staff received training in the safe handling of medicines and had also been provided with factsheets on commonly prescribed medicines and common medical conditions in older people. Senior staff completed regular competency checks to ensure medicines administration practice remained up-to-date and safe.
- Medicine administration records [MARs] were stored online and staff were unable to sign out of a care call without confirming all medicines had been administered as required. Senior staff monitored the MARs in real time which meant any issues could be addressed immediately. As a further safeguard, the registered manager conducted a monthly audit of each person's MAR, following up any queries as required.

#### Assessing risk, safety monitoring and management

- The provider ensured potential risks to people's safety and welfare were assessed and managed. For example, one person was at risk of skin damage and staff had been provided with detailed guidance on how to reduce this risk. Senior staff reviewed and updated people's risk assessments on a regular basis. Reflecting feedback from our inspector, the registered manager took prompt action to further improve the recording of some specific risks to people's safety.

#### Preventing and controlling infection

- The provider had reviewed and strengthened existing infection prevention and control measures in response to the COVID-19 pandemic. For example, staff had been provided with additional personal protective equipment (PPE) and were tested weekly to reduce the risk of COVID-19 spreading within the service. One relative told us, "They always wear COVID protective gear. I feel very safe in their care."

#### Learning lessons when things go wrong

- The provider had systems in place to review incidents to identify any organisational learning for the future. For, example in response to a recent safeguarding case, the registered manager had taken action to strengthen food safety policy and practice.



# 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

- Systems were in place to assess and determine people's individual needs and preferences. These were set out in each person's care plan and were reviewed regularly by senior staff.
- The provider used a variety of information sources to ensure staff at all levels were aware of any changes to good practice guidance and legislative requirements. The service operated as a franchise and the registered manager told us the national franchise network was a helpful source of information and advice.

Staff support: induction, training, skills and experience

- People told us staff had the right knowledge and skills to meet their needs effectively. Commenting on one staff member in particular, a relative told us, "Mum has dementia. [Name] is well-trained in dementia care. She is brilliant, fantastic."
- The provider maintained a comprehensive induction and training programme for staff. Commenting positively on their induction training, one staff member said, "It was intense. I had one-to-one training with [the manager] in medication, moving and handling and first aid. Then I went out and shadowed other carers." The registered manager also used part of each staff meeting to provide additional training to the team. One staff member told us, "We do different topics every month [such as] medication, safeguarding, all sorts! It's a nice ... reminder."
- Staff were provided with regular one-to-one supervision and told us they felt very well-supported by the registered manager and other senior personnel. One staff member told us, "[Senior staff] are very supportive. They are always at the end of a phone. If I am unsure about the smallest thing, I never hesitate to ring."
- Senior staff also conducted regular unannounced spot checks of care practice. One staff member commented, "I had a spot check last month from [name], the senior. Followed by my supervision with [the registered manager] a few days later, to talk about [it]. I think it is a good system, making sure we are doing what we are supposed to be doing."
- Both the owner and registered manager were fully trained in all aspects of care delivery and regularly worked hands-on with clients.

Staff working with other agencies to provide consistent, effective, timely care

- Senior staff had established effective working relationships with a range of external organisations to support them in the provision of effective care and support. For example, with occupational therapists, community psychiatric nurses and social workers.

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

- Staff were aware of people's individual food preferences and assisted them to enjoy food and drink of their choice. For example, one relative told us, "The carers give [name] choices in ... food. They leave him a drink and also make me a cup of tea."
- The provider was aware of potential risks relating to nutrition and hydration and took steps to address them. For example, staff were provided with guidance on how to support people living with diabetes.

Supporting people to live healthier lives, access healthcare services and support

- Staff worked proactively with GPs, district nurses, occupational therapists, the community mental health team and other health and social care professionals to ensure people had the support of local services whenever this was necessary. For example, one staff member told us, "If we have any concerns about [name]'s catheter, we always let [the registered manager] know. He sorts it out quickly with the district nurses."
- In an innovative approach aimed at promoting more effective multi-agency care, when a person started using the service for the first time, the provider sent a letter to the person's GP advising them that they were now involved in the person's care. Staff also accompanied people to healthcare appointments and collected their medicines, whenever this type of support was required.

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 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. 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 and were satisfied that staff understood the importance of seeking consent before providing care or support. Procedures were in place to support staff in making formal decisions in people's best interests, should this ever be necessary.

# 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 Outstanding. This meant people were truly respected and valued as individuals; and empowered as partners in their care in an exceptional service.

Ensuring people are well treated and supported

- The service was built on strong person-centred values and the culture reflected this. Describing his philosophy of care, the owner told us, "It is really important to me that we provide high quality care. I put care ahead of business." This personal commitment to placing people at the very heart of the service was clearly understood by staff. For example, one staff member told us, "We don't look at them as a patient or client, they're people. I really care for them, as I would a relative." Another recently recruited member of staff said, "It's going really, really well. I wish I'd [joined] sooner. Radfield ... make a difference to people. It's because they care. They want us to treat our clients ... as they would treat their family."
- The owner was deeply involved in all aspects of the running of the service. He provided principled, person-centred leadership based on three clearly articulated organisational values: 'We are a Family. We are Proud to Care. We are on Your Side.' The owner's hands-on presence and his inspiring, values-based approach had created an exceptionally positive organisational culture which empowered staff to use their own initiative and ingenuity in going 'above and beyond' to promote people's well-being and happiness and provide care of the very highest quality.
- Staff had developed strong relationships with people, they understood what mattered to people and used this to inform their support. For example, noting that one person had said how much they liked shepherd's pie, a staff member had made one at home and given it to the person on their next care call, much to their surprise and delight. One member of staff told us, "I organised a window cleaner for [name]. A little thing that they [then] didn't have to worry about." Another staff member said, "[Name] likes to wear a tie but he can't tie it himself anymore. So, I learned how to tie it for him. I practiced on my boyfriend on my weekend off!" The registered manager described the impact on the person's self-esteem as 'enormous'.
- Staff had also formed trusting and enduring relationships with people's families. For example, the registered manager told us of one staff member who, in her own time, still visited the bereaved relative of a former service user, several months after their loved one had died. Whenever someone passed away, the provider sent cards of condolence to their relatives and gave staff paid time off to attend their funeral. An online review stated, 'Mum is treated with respect and looked after as if she is a member of the family. We all ... have total confidence in Radfield Stamford.'
- People were supported by deeply empathic and caring staff. People were sent a card on their birthday and at Easter, people had received a chocolate gift which the registered manager stated, 'Lifted people's spirits and resulted in some lovely feedback.' As a further act of kindness, staff had baked cakes and savoury treats for an 'afternoon tea box' which was presented as a gift from all the staff to their clients. Describing the staff, one person told us, "They are kind and caring, like a family."
- Staff at all levels were sensitive and provided exceptionally compassionate support that had a positive

impact upon people's wellbeing. In a compelling illustration of the owner's own deep respect and compassion for the people in his care, he had arranged for staff to complete a full deep clean of a new client's home, free of charge. The registered manager told us, "It took a number of hours but [these] were not charged for. The client had initially been very depressed [but] with the improvements in personal hygiene, their morale quickly recovered, and they commented that he felt better than he had done for many years." Describing the owner, a staff member said, "Nothing for [name] is too much trouble. He will go out of his way to help."

- Staff deployed technology innovatively to find creative ways to meet people's needs and preferences. For example, they used a secure messaging app to communicate with each other throughout the day. Describing how this innovation had helped them become even more attentive to people's needs, one staff member told us, "It's really helpful. For instance, if a client has run out of bread [I can put a message on the app] and one of the other girls will get it for them [before the next visit]."
- The provider took time to match people and staff as carefully as possible, taking account of people's cultural background; personality and interests. The registered manager told us, "When we are doing an assessment, if [a particular member of staff] feels like a better fit, we match them [to the person]. It's not just geographic." An online review stated, 'From the first visit, we have been so impressed by the personal care and attention given to Mum. Nothing is too much trouble. We are so very grateful and so thankful to have found this wonderful [service].'

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

- The provider took great care to engage with people and their relatives to identify their individual needs and preferences. In a recent online review, a relative had stated, 'From the moment we phoned Radfield they were by far the most professional, caring company we'd spoken to. They arranged an initial meeting with my mother and myself to get to know every detail about my mother. Before coming up with a care plan that matched my mother's needs perfectly.'
- People told us staff were careful to involve them in day-to-day decisions about their care and always respected their choices. One person's relative said, "They do things in a way [name] likes." Another person commented, "They do everything I want them to do." Describing their approach, one staff member told us, "I always ask [people] what they want. It is always up to them."
- Staff received dementia awareness training and had devised bespoke methods of communication to enable people living with dementia to express their choices and direct their care. One staff member told us, "[With some people] I get a physical object [like a food item] and show them. People can get a bit confused and if they can see something it helps reduce confusion [and enables them to make a clear decision]."
- People were also supported to exercise their right to decide who provided them with care. For example, the registered manager told us, "There are [several] clients who [wouldn't want] me or the owner to [provide them] with intimate personal care [because we are male]. And we respect that decision. It's not a case of 'You've got to have it'."
- To give people and their relatives even greater involvement in the delivery of their care, the provider had arranged remote access to the online care planning and call scheduling systems. About 70% of families had taken up this new option, with all necessary permissions obtained and documented. Describing the positive outcomes for people of this innovative new approach, the registered manager told us, "A carer made a note in the system about [name] struggling to see. Their relative, who lives in Germany, spotted the note and made an optician's appointment." In an online review, one relative had commented, 'I get daily updates via the app and am in regular contact by phone and email with the owner and the care manager. I do feel as if I'm part of the team working together to care for [name].'
- The registered manager was aware of local lay advocacy services and said he would help people obtain this type of support, should it be necessary. Lay advocacy services are independent of the provider and the local authority and can support people to make and communicate their wishes.
- In a further demonstration of the provider's total commitment to promoting people's welfare and

happiness, the owner and his team also took on the role of advocates themselves, whenever this was necessary and appropriate. One of the provider's core values stated, 'We ... act as caring advocates, to uphold wishes and ensure wellbeing.' Confirming that these were not just aspirational warm words, the owner told us, "We [recently] took a call at the weekend. The client wanted to sit out in the sunshine but his wife couldn't [manoeuvre his wheelchair] outside. So, we found a ramp supplier [and organised installation straightaway]. If it is important to the client, it is important to us."

Respecting and promoting people's privacy, dignity and independence; respecting equality and diversity

- Respect for people's rights to privacy and dignity was at the heart of the service. The owner told us, "Our ethos is not about taking over people's lives. [Rather] it's about allowing people to live independently ... at home." This was clearly understood by staff who went to considerable lengths to promote people's independence. For example, staff had gone out of their way to supply people with a variety of aids to independent living, including raised toilet seats and rollator baskets. Describing the support and encouragement they received from staff to help them retain their ability to mobilise independently, one person commented, "They take me outside with my frame and we walk up and down the drive."
- The provider was committed to supporting people in a non-discriminatory way. Staff received equality and diversity training and understood the importance of adjusting their approach to take account of any cultural preferences or protected characteristics. For example, staff had obtained a special clock for one person living with dementia, to help them retain as much control over their life as possible.
- Staff also understood the importance of supporting people in ways which helped maintain their privacy and dignity. One staff member told us, "[When providing personal care] I keep people warm and comfortable and [maintain] their dignity. It [must be] difficult to have to accept someone else doing things for you. I understand that." A relative commented, "The carers are respectful and observe [name]'s dignity."
- The provider was aware of the need to maintain confidentiality in relation to people's personal information. People's care plans were stored securely and staff used encrypted software to communicate with each other.

## 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 Outstanding. This meant the service was tailored to meet the needs of individuals and delivered to ensure flexibility, choice and continuity of care.

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

- The provider took great care to ensure people were supported by the same small team of regular staff. Describing some of the positive benefits of this approach, the registered manager told us, "The client gets to have [a fuller] relationship with their carers. [This promotes] good rapport and consistency of standards. It's a very different approach to other companies I have worked for." Similarly, a member of the care team commented, "We see the same person each time. We build a rapport and really care for them." A relative told us, "[We have] a team of three regulars attend. The carers really get to know [name] and [as a result] the quality of care is excellent."
- Despite the significant impact of the COVID-19 pandemic, the provider had also invested considerable resources in maintaining a continuous programme of pre-care 'introduction visits', ensuring people had the opportunity to meet new members of staff before they started providing them with care. Describing this innovative approach, the owner told us, "How daunting must it be when a stranger knocks on the door [and then comes in to deliver personal care]. [In this service] no one goes in blind. Every single client meets their carers before they do a care call." A recent online review stated, 'Each member of staff that cared for my mother was introduced to her by the management and knew her every need before starting. My mother loves every member of the care team ... and feels extremely happy with the care they all give her.'
- As a result of the provider's principled commitment to offering total staffing continuity, staff had a deep understanding of people's individual needs and preferences and provided them with exceptionally responsive, person-centred care which had a positive impact on their well-being and increased their independence. For example, staff had worked together to support one person with complex mental health needs to get involved in a range of activities such as baking, painting, flower-arranging, 'pamper sessions' and excursions in the local community. This creative, 'whole-team' approach had helped to reduce the person's loneliness and boost their self-esteem, enabling them to live independently at home without requiring episodes of inpatient psychiatric treatment, for the first time in many years.
- Similarly, staff had worked closely with one person to devise a range of mental and physical exercises to support their recovery from a stroke. Describing this case the registered manager told us, 'The initial request for care support had been to support the client with basic activities such as personal care, meals and medication. However, the team was determined to help their recovery and showed significant determination and ingenuity to do this. The client has made great progress and recovered much of their independence. This has improved their wellbeing, helped them to recover confidence and restored their morale.'
- In their determination to 'go the extra mile' in responding to people's individual needs, staff had formed close and productive working relationships with local healthcare professionals. One local professional told

us, "[Radfield] really do stand out [in comparison] to other [care companies]. We worked very closely together with one [of my clients], allowing them to stay living at home longer [than I had originally thought likely.] Even during lockdown [communication was excellent]. I have told other people about this company."

- The provider maintained a sophisticated online care planning system which enabled staff to respond immediately to any changes in people's needs and wishes. For example, one staff member told us, "Yesterday, one of my clients was prescribed a [new medicine]. I rang [the registered manager] and he put it straight onto the care plan, so all the other staff knew [immediately]." Another member of staff said, "The care plans are on [our phone]. They are always up to date. We always read them before [each visit]."
- In developing care plans, staff took great care to work closely with people and their relatives to specify their individual needs and preferences, in a very high level of detail. For example, one person's care plan stated, 'I would like my carer to be present while [I wash in the morning], to pass me items I require and to wash my back, legs and feet. When dressing, I would like the carers to ask me what I would like to wear, advise on weather conditions and help put on clothing that is required.'
- Staff also took time to explore each person's life history; their cultural beliefs and personal interests. For example, one person's care plan highlighted the enduring importance of their Catholic faith. Another plan described the central role the person's extended family played in their life. Staff received equality and diversity training and were aware of the need to adjust their approach to take account of people's individual needs and preferences, including any protected characteristics. A staff member told us, "[Our clients] have as much rights as anyone else."
- In one particularly vivid example of the staff team's determination to respond creatively to people's diverse needs and provide them with equality of support, the registered manager told us of a person with a visual impairment who was unable to complete the process for placing an on-line shopping order for home delivery of their weekly shop. This had significantly compromised the person's independence and quality of life. To address this issue, office staff now made the on-line order on the person's behalf, with delivery coordinated to coincide with planned care calls, enabling staff to support the person to receive the delivery and put the items away. There was no charge to the client for the additional time incurred by the office team.
- Senior staff kept each person's care plan under regular review, updating it as required to reflect changes in people's needs and wishes. An online review stated, 'Before [name] came [back] out of hospital, a new care plan was put together to ensure her [changing] needs were met.' In an innovative approach to supporting clients with particularly complex needs, the provider had recently introduced a system of 'client-centred reviews'. All of the client's regular care staff were involved in these reviews, to ensure there was an opportunity for full information sharing and discussion. Any identified actions were reviewed and agreed with the client prior to implementation.

### Meeting people's communication needs

Since 2016 onwards all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard (AIS). The standard was introduced to make sure people are given information in a way they can understand. The standard applies to all people with a disability, impairment or sensory loss and in some circumstances to their carers.

- The registered manager was unaware of the AIS but told us he would incorporate it into the provider's approach for the future. In the meantime, the provider's commitment to consistency of staffing meant staff had a rich understanding of each person's individual communication needs. For example, one staff member described how they used hand gestures and other methods to aid communication with people living with dementia. She told us, "We have had dementia care training in our induction and we are all Dementia Friends ... [which] helps." Staff had also developed the ability to communicate effectively with another person, despite their very poor diction. This had further enhanced their relationship and the person's feeling of self-worth.
- In an innovative approach aimed at improving communication and reducing people's anxiety about who

would be coming into their home, people were provided with photographs of all the staff in their care team. At the end of each care call, staff advised the person who would be coming on the next call, using the photographs as a communication aid, if necessary.

- Despite the COVID-19 pandemic, the provider had continued to develop professional networks and community contacts with the potential to benefit the people who used the service. For example, the owner was involved in a project to introduce an innovative new telephone monitoring system to enhance people's independence and help them feel safer living in their home.

Improving care quality in response to complaints or concerns

- The provider maintained an extremely open and positive approach to feedback from people and their relatives. For example, a sign in the office read, 'We challenge you to challenge us.' With refreshing honesty, the owner told us, "We can't be perfect. We know we can't get it right all the time. [But] we do try to take every opportunity to learn and improve."
- The owner and registered manager were in daily contact with people and their relatives, enabling them to act quickly to resolve any issues or queries. For example, the owner told us, "[Name] complained about things missing from their care plan, such as the position of their slippers. It was important to [name], so we [amended] the care plan to include this real level of detail [and] resolve the issue." A relative told us, "When I have spoken to the office, my requests have been dealt with promptly and to my satisfaction." An online review stated, 'The owner, [registered] manager and their team ... are available at the end of a phone 24/7 to talk through any issues arising ... to ensure [name] is safe and supported effectively.'
- Reflecting this exceptionally responsive approach to customer care, formal complaints were very rare. One relative told us, "I think the company is very well run. [We] have no complaints." Another relative told us, "I have no complaints but would ring the office if I did." An online review stated, 'We thoroughly recommend this wonderful, caring home care service.'
- The provider worked transparently and effectively with external agencies to investigate and address any concerns that had been raised. For example, in response to a local authority safeguarding alert, the registered manager had conducted a thorough investigation and made changes to policies and practices to address his findings.

End of life care and support

- Staff had been provided with person-specific training and guidance on the provision of end-of-life care, including an extremely detailed document describing possible 'end of life signs and changes'. Whenever necessary, staff supported people and their family with sensitivity and compassion as they approached the end of their life. Describing the support provided to one person, the owner told us, "We enabled [name] to stay at home ... liaising with family members and the [specialist palliative care nurses]."
- Commenting on the provider's expertise in the provision of responsive palliative care, one on-line reviewer had stated, 'We are using Radfield carers to support my [relative] who is terminally ill. The care and communication ... since my [relative] was discharged from hospital and in the run-up to their discharge have been excellent. The [owner] has been very helpful in accommodating my [relative]'s needs and the registered care manager has introduced each carer personally to my [relative] and has been proactive in ensuring that all my [relative]'s needs are met effectively.'
- The registered manager told us a plan was in place to appoint a staff member as an end-of-life care champion for the service, to research best practice and lead staff training and development in this important area.



# 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 Good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

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

- Everyone we spoke with us told us how highly they thought of the service and the way it was managed. For example, one person said, "The company seems really well-organised and managed. I think I am very fortunate to be with them." Another person commented, "I think the company is very well-run. I would recommend them."
- At the time of our inspection, the service had a rating of 9.9 out of 10 on a national homecare comparison site. This was based on 18 reviews, all of which were extremely positive. For example, one recent reviewer had stated, 'The team of carers provided were professional, well trained and very caring, nothing was too much for them. To have peace of mind that you can trust your loved ones are getting the best possible care is something that we can say we experienced with Radfield. We would highly recommend them.'
- As described in the Caring section of this report, the owner was involved in all aspects of the running of the service and led his team with considerable energy and compassion. One staff member said, "[The owner] and his wife actually care about us and the clients. [The owner] is a very optimistic person. Always there with a smile. He's quite infectious. It makes you want to go to work." Another member of staff told us, "[Last winter] my car got stuck in a ditch. [The owner] came and rescued me and took me to my first client. He then got a tractor, pulled my car out and dropped it off [so I could continue on my round]. They do care about the staff." The registered manager commented, "I find it exceptionally refreshing ... seeing how much [the owner] cares and is involved with the company."
- At the time of our inspection, the registered manager had only been in post for a few months. However, in this short period he too had won the respect and admiration of his team. One staff member told us, "He's really good. Really knows his stuff. [The owner] and him go out and do calls. They literally get their hands dirty. You don't come across that very often. It massively increases our respect [and] is really good for team [spirit]." The registered manager commented, "How can I tell you do something, if I have not done it myself?"
- The owner had a deep interest in the welfare and happiness of his team and went to considerable lengths to promote this. For example, he told us, "I really want to look after them. We are an accredited Real Living Wage employer [and] unusually for a homecare company, we pay travel time and mileage. We pay staff a £5 mobile phone data allowance every month and we paid the carers for two hours plus travel, to enable them to get their COVID vaccinations. [Last summer] we put £5 into each carer's bank account to enable them to buy ice creams."
- A staff member commented, "We were given a lovely M&S hamper for Christmas and last winter [the owner] bought us all thermos flasks [for the cold weather]. These little things make you feel they do care about the staff." Another member of staff told us, "They regularly have cake in the office and we pop in to help

ourselves. And [the owner] is organising a shindig in July [when it is allowed]. We are all going to get together."

- Reflecting this caring approach and the positive, person-centred organisational culture, staff told us they were proud to work for the provider. For example, one staff member said, "[We] do make a difference. One gentleman has had four or five care companies. This one is the only one he says he has had no complaints with."

Continuous learning and improving care; 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; Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements

- The provider was committed to continuous organisational learning and improvement. In support of these objectives, the registered manager maintained an annual quality improvement plan which included initiatives to further enhance care planning, medicines management and awareness of the MCA. Detailed business plan and governance structure documents were kept under regular review and significant events were reviewed to identify any opportunities for organisational learning.
- As detailed throughout this report, the provider had an innovative approach to service design and delivery. For example, the extensive use of modern information technology solutions to enhance communication and the use of pre-care 'introduction visits' to reduce people's anxiety about who would be providing them with care
- A range of audits was in place to monitor the quality of the service. These included regular care plan reviews and monthly medication and safeguarding checks. In response to the COVID-19 pandemic, the provider had introduced a new daily audit of PPE stocks and staffing availability.
- Both the owner and registered manager were aware of their duty of candour and, as described throughout this report, displayed a commendably open approach at all times during our inspection.
- The provider was aware of the need to notify CQC of any untoward incidents or events within the service.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Working in partnership with others

- To promote engagement, the provider had recently introduced an annual survey of people and their relatives. We reviewed the initial results of the survey and saw that feedback was entirely positive. For example, one person had commented, 'I like the consistency of the same regular carers. I like to know who is coming and that they are introduced to [me] so it is not a stranger coming in.' The registered manager told us he would collate the full results and produce an action plan to address any issues.
- The provider had also organised a recent survey of staff, with similarly positive results. The registered manager had reviewed the feedback and told us he had identified a number of areas for further action.
- In anticipation of COVID restrictions easing, the registered manager was working on plans for a picnic for clients and their families, as a further means of strengthening their engagement with the service. He also told us he aimed to develop links with local charities, to the potential benefit of the people who used the service and other vulnerable adults living locally.
- As described in the Effective and Responsive sections of this report, the provider had established effective partnerships with a range of other professionals including GPs, district nurses and therapists. A local healthcare professional commented, "My experience of working with this company has been excellent." The provider's commitment to promoting effective multi-disciplinary working could also be seen in the letter sent to every new client's GP, as described in the Effective section of this report.
- Looking ahead, the registered manager told us he was in dialogue with a local college to explore apprenticeship opportunities. The owner told us he was also interested in exploring opportunities to open up staff training courses to relatives.
- The provider participated in pilots and projects to identify and disseminate best practice. For example, as

described in the Responsive section of this report, the owner was involved in a project to introduce a new telephone monitoring system.