

Reliance Community Care Limited

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Inspection report

1 Westdown Drive
Thurmaston
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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?	Requires Improvement ●
Is the service well-led?	Good ●

Summary of findings

Overall summary

About the service

Reliance Community Care Ltd is a domiciliary care agency providing personal care to people living in their own homes. The service supported 35 people at the time of our inspection. Not everyone who used the service received personal care. 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.

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

The timings of staff visit was not always as agreed at people's assessment. The provider had not made sufficient improvement on this issue since our last inspection. Care plans contained information and guidance for staff to meet people's needs. They were reviewed regularly to reflect people's current needs.

People were safe. The provider had safe recruitment protocols. Medicines were managed safely. Staff had guidance to report abuse or reduce the risk of people coming to harm.

Staff were trained and knowledgeable to fulfil the requirements of their role. They supported people to meet their nutritional needs and access health care professional when required.

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.

Staff were kind and compassionate. They treated people with dignity and respectful. They took steps to promote people's right to privacy and enabled them to be involved in decisions about their care.

The registered manager demonstrated a good understanding of their regulatory duties. They maintained a good oversight and leadership of the service. They had systems in place to monitor the quality of care people received and used this to improve the standard of care.

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

Rating at last inspection

The last rating for this service was Good (published 26 October 2016).

Why we inspected

This was a planned inspection based on the previous rating.

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 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 caring.

Details are in our caring findings below.

Good ●

Is the service responsive?

The service was not always responsive.

Details are in our responsive findings below.

Requires Improvement ●

Is the service well-led?

The service was well-led.

Details are in our well-Led findings below.

Good ●

Reliance Community Care Limited

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 Care Act 2014.

Inspection team

The inspection was carried out by one inspector and one 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 houses and flats.

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

We gave the service 48 hours' notice of the inspection. This was because it is a small service and we needed to be sure that the provider or registered manager would be in the office to support the inspection.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority. We used the information the provider sent us in the provider information return. 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. We used all of

this information to plan our inspection.

During the inspection

We spoke with five people who used the service and five relatives of people who used the service about their experience of the care provided. We spoke with the care coordinator and the registered manager.

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

After the inspection

We continued to seek clarification from the registered manager to validate evidence found. We spoke with two care staff.

Is the service safe?

Our findings

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

At the last inspection this key question was rated as Good. At this inspection this key question has remained the same. This meant people were safe and protected from avoidable harm.

Staffing and recruitment

- The service employed enough numbers of staff to meet people's needs. Staff told us they felt there were enough staff to meet the demands of the role and the people they support.
- The provider followed safe recruitment practices. They completed relevant pre-employment check which assured them potential employees were safe to work with people who used services.

Systems and processes to safeguard people from the risk of abuse

- People felt safe when they used the services of Reliance Community Care Ltd. They felt safe because they were confident in staff ability to meet their needs. One person said, "I feel safe with the staff, they seem competent particularly at using [equipment], in fact they are very good with it." A relative told us, "[Person] is safe with the staff I don't doubt that."
- Staff were knowledgeable about what would constitute abuse to people. They knew how to keep people safe from avoidable harm and how to raise any concerns they may have regarding people's safety. They had information about agencies to report any issues of abuse or malpractice.

Assessing risk, safety monitoring and management

- Staff assessed risks associated with the care and support people received. This included risk to people, their relatives and staff. They put measures in place to minimise the occurrence of risks.
- People's risk assessment included information on how staff would support them to be safe in their home or in the community. Risk assessments promoted people's safety in a way that did not restrict freedom or rights. Records showed risks assessments were reviewed regularly to ensure they reflected people's current needs and good practice on how to reduce risk.

Using medicines safely

- People's medicines were managed safely. Staff provided the support people required with their medicines. This included prompting people to take their medicines. They completed required records to show the support people received.
- People's medicines records showed they received their medicines as prescribed by their doctor. Senior staff regularly audited medicines records to check their support was delivered safely. They also supported staff to be competent with supporting people with their medicines.

Preventing and controlling infection

- People were protected from the risk of contracting or spreading an infection. Staff had received training and followed good practice such as using personal protective equipment when they supported people with their needs. A relative told us, "They [staff] have always been wearing aprons and gloves when I have seen

the staff working."

Learning lessons when things go wrong

- Records showed the registered manager reviewed and investigated incidents and complaints at the service. They made changes to the service to minimize the risk of a 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.

At the last inspection this key question was rated as Good. At this inspection this key question remained the same. 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

- People's needs were assessed before their care packaged commenced. Their assessment included support they required from staff to achieve their desired outcomes in their physical and mental health. One person told us, "Someone came out to discuss my needs at the beginning." A relative also told us staff completed an initial assessment and went on to tell us about the care plan in place for their family member.
- Assessments considered how the service would support people who were protected under the Equality Act. This included support people would require because of their disability, age, cultural needs etc. Staff used this information for people's care planning. This meant the service was committed to anti-discriminatory practices.

Staff support: induction, training, skills and experience

- Staff were supported by skilled and experienced staff. Staff had received relevant training they required to fulfil the requirements of their role. They have access to regular supervision and support in their role.
- People told us staff were competent in their role and supported them effectively with their needs. A relative told us, "I feel the staff do have the skills to look after [person]. They are all very good at it."

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

- Where people required support with preparing their meals, staff provided support as agreed in people's care plan. They kept records to demonstrate the support provided and worked with relatives and other professionals to meet people's nutritional needs.

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

- The service worked collaboratively with other agencies to ensure the support people received was in a timely and consistent manner. For example, when people joined the service staff worked with the commissioning authority to ensure people received prompt and safe care that met their needs. They also worked with health professionals, sharing relevant information in instances where people required a hospital admission.

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

- People were supported to maintain their health and wellbeing. Staff made prompt referrals to health care service where people required this. People told us staff supported and involved them with monitoring their health condition(s). One person told us, "They will let me know if I have any [health symptom] so that I can contact the district nurse, we work together." A relative told us, "The carers from Reliance are lovely and know how to look after [person] and keep their [health] intact. They will show me any problems, for

example, once there was [health condition] and they pointed it out, so we could get the district nurse."

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.

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 and found people were supported as required by the MCA.

- Staff demonstrated a good understanding of MCA. They sought people's consent before supporting them. They respected people's choices and preferences.

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.

At the last inspection this key question was rated as Good. At this inspection this key question remained the same. 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

- People were supported by kind and compassionate staff. They spoke highly of the caring attitudes of staff. A relative said, "All the staff we have had have been very good, very nice. They all understand [person]'s condition and [mine]."
- The caring attitudes of staff improved people's emotional wellbeing and made them feel they mattered. A relative told us, "They are so caring and will be laughing and joking with [person], just what he needs to lift his spirits." Another relative said, "They will see to [person] and then ask if I need any help like this morning, [example support]; it made such a difference for me. They are kind and caring, nice people, respectful."

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

- Staff involved and supported people to make their own decisions where possible. They had sufficient knowledge of each person's personality and understood their communication style to carry out their wishes and preferences. One person told us, "They [staff] will do anything I want, it is all about what I fancy."

Respecting and promoting people's privacy, dignity and independence

- People felt respected. They told us staff promoted their dignity and right to privacy. One person told us, "They [staff] are all very nice, very good. They make sure they look after my 'modesty' when seeing to me and will take me into the bathroom." A relative said, "They are respectful to [person] and her home."

Is the service responsive?

Our findings

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

At the last inspection this key question was rated as Requires Improvement. At this inspection this key question remained the same. This meant people's needs were not always met through good organisation and delivery.

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

- People told us staff did not always keep to times agreed in their assessment. Some people stated staff did not always arrive on the times agreed, other people stated that staff did not always stay the agreed duration of their care visit. The provider had not made sufficient improvement on this issue since our last inspection. We did not see evidence that this had impacted on the care people received. We brought this to the attention of the registered manager who told us they worked with people to address the issues raised.
- People told us they were not always informed of staff who would be visiting them. Some people told us they were sometimes visited by staff they had not been introduced to them by the service.
- People needs were assessed before they used the services of Reliance Community Care Ltd. Staff involved people, their relatives and other professionals involved in people's care. The information from assessment were used in developing people's care plans to reflect the support they needed to promote their independence and quality of life.
- People's care plans reflected their individual needs. They included information about their personal history and preferences. They provided information and guidance to support staff meet people's needs. Staff reviewed care plans regularly to ensure they continued to reflect people's needs.

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.

- At the time of our inspection, none of the people using the service required information in alternative formats. The service had policies and protocols in place which provided support for accessible information if required.

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

- Where required, staff supported people to be part of community they lived in. They supported people to engage in social activities and access activities in the community. Some people required support with social interaction in their own home. Staff provided support with social interaction as agreed in people's care plan.

Improving care quality in response to complaints or concerns

- People knew how to raise any concerns or complaints they may have about their care. They told us they

sometimes struggled to reach the office staff by phone. However, they said any concerns raised were promptly resolved.

- We reviewed records of complaints received at the service. We saw the registered manager investigated and acted on them. We saw the registered manager used complaints as tool for improving the service. For example, they improved the assessment process and staff training following a complaint.

End of life care and support

- The provider had policies in place to support staff provide the care people required at the end of their life. They sought to provide support that respected people's choice and support them to be comfortable and pain free. At the time of our inspection, none of the people using the service was receiving end of life care and 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.

At the last inspection this key question was rated as Good. At this inspection this key question remained the same. 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

- There was open and transparent leadership at the service. Staff felt supported by their managers. They were supported to report any concerns regarding people's care or poor practice.
- Other than the comments raised to us regarding staff not always arriving on the times agreed, people told us they would recommend the service. Staff were happy to work within the service. They spoke positively about their experience of working within the service and the positive difference they made in people's lives.

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

- During our conversations with the registered manager, they demonstrated a good understanding of their responsibility to act on the duty of candour and we saw evidence from records of incidents and complaints where they had applied this.

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

- The registered manager understood their role and fulfilled their regulatory responsibilities. They maintained good oversight of the service and together with their team worked effectively to check the quality of care delivered was to a good standard.
- The service had effective systems in place for monitoring the quality of care people received. Some of the way they did this was through seeking feedback via surveys from people who used the service and their relatives.

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

- Staff felt supported to fulfil the responsibilities of their role. They had access to regular supervision. They told us they could easily access the care coordinator or registered manager for support and guidance when required.
- The service had protocols in place to promote an inclusive approach to care provision, considering people's requirements with respect to their culture, religion or disability in their needs and preferences.

Continuous learning and improving care

- The provider had systems in place to monitor the quality of care they provided. This included checks and

auditing of various aspect of people's care. These were regularly analysed, and areas of improvement were identified and acted on.

Working in partnership with others

- The service worked collaboratively with other professionals to ensure the care people received consistently met people's needs.