

# Relief Professionals Group Ltd

# Relief Group Care

## Inspection report

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## Ratings

Overall rating for this service	Inspected but not rated
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Is the service safe?	Inspected but not rated
Is the service well-led?	Inspected but not rated

# Summary of findings

## Overall summary

### About the service

Relief Group Care is a domiciliary care agency. It provides personal care to people living in their own houses and flats in the community. At the time of the inspection the service was providing personal care to seven people.

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

We visited the office to check how people using the service were being kept safe. We reviewed how care was being provided against the information the provider had shared with us.

People told us staff understood their needs and how to support them. However, staff did not always have access to clear information to safely meet people's needs and to keep themselves safe. Since our last inspection the provider had purchased an electronic recording system to help with safety but there was no clear plan for the implementation of this system.

People received support to take their medicines. However, required actions identified at the last inspection to ensure staff completed this activity safely, following best practice guidance, had not been robustly implemented.

We continued to find errors and omissions in the staff recruitment process. An effective recruitment system was still not fully in place.

Checks to maintain and improve the service had been implemented since our last inspection. For example, the provider had purchased an electronic application to help monitor people's medicines. However, there was no plan with timescales to action this process. Further processes including oversight and action planning were required to ensure the service remained compliant and people received safe care and support.

The registered manager had an awareness of the work required and showed a determination to implement the required updates.

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 and update

The last rating for this service at the previous premises was requires improvement (published 29 October 2019). The provider completed an action plan after the last inspection to show what they would do and by

when to improve. At this inspection enough improvement had not been made and the provider was still in breach of regulations.

#### Why we inspected

We carried out an announced comprehensive inspection of this service at their previous premises on 28 August 2019. Breaches of legal requirements were found. We undertook this targeted inspection to check they had followed their action plan and to confirm they now met legal requirements. You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Relief Group Care on our website at [www.cqc.org.uk](http://www.cqc.org.uk). The overall rating for the service has not changed following this targeted inspection and remains requires improvement. The CQC have introduced targeted inspections to follow up on Warning Notices or to check specific concerns. They do not look at an entire key question, only the part of the key question we are specifically concerned about. Targeted inspections do not change the rating from the previous inspection. This is because they do not assess all areas of a key question.

We are mindful of the impact of the COVID-19 pandemic on our regulatory function. This meant we took account of the exceptional circumstances arising as a result of the COVID-19 pandemic when considering what enforcement action was necessary and proportionate to keep people safe as a result of this inspection. We will continue to discharge our regulatory enforcement functions required to keep people safe and to hold providers to account where it is necessary for us to do so.

#### Follow up

We will request an action plan for the provider to understand what they will do to improve the standards of quality and safety. We will work alongside the provider and local authority to monitor progress. We will 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 not always Safe

At our last inspection we rated this key question requires improvement. We have not reviewed the rating at this inspection. This is because we only looked at the parts of this key question we had specific concerns about.

Details are in our safe findings below.

**Inspected but not rated**

### Is the service well-led?

The service was not always Well led

At our last inspection we rated this key question requires improvement. We have not reviewed the rating at this inspection. This is because we only looked at the parts of this key question we had specific concerns about.

Details are in our Well led findings below.

**Inspected but not rated**

# Relief Group Care

## **Detailed findings**

### Background to this inspection

#### The inspection

This was a targeted inspection to check whether the provider had met the requirements of the specific concern we had about safe care, medicines management, and governance. We will assess all of the key questions at the next comprehensive inspection of the service.

#### Inspection team

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

#### Service and service type

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

#### What we did before the inspection

We reviewed information we had received about the service since the last inspection. The provider was not asked to complete a provider information return prior to this inspection. This is information we require providers to send us to give some key information about the service, what the service does well and improvements they plan to make. We took this into account when we inspected the service and made the judgements in this report. We requested feedback from the local authority and Healthwatch. Healthwatch is an independent consumer champion that gathers and represents the views of the public about health and social care services in England. We used all of this information to plan our inspection.

#### Notice of inspection

We gave the service 24 hours' notice of the inspection. This was because we needed to be sure that the provider or registered manager would be in the office to support the inspection.

Inspection activity started on 16 December 2020 and ended on 18 December 2020. We visited the office location on 16 December 2020.

#### During the inspection

We spoke with two people who received a service and five family members. We spoke with the registered manager and six care workers. We reviewed a range of records. This included four people's care and medication records. We looked at three staff recruitment files and associated training records. A range of records relating to the management of the service including audits, and, policies and procedures were reviewed.

#### After the inspection

We continued to seek clarification from the provider to validate evidence found.

# 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 requires improvement. At this inspection this key question has remained the same. This meant some aspects of the service were not always safe and there was limited assurance about safety. There was an increased risk that people could be harmed.

The purpose of this inspection was to check if the provider had implemented sufficient improvement to be compliant with breaches of regulation identified in the previous inspection report (published 29 October 2019). We will assess all of the key question at the next comprehensive inspection of the service.

Assessing risk, safety monitoring and management; Staffing and recruitment; Using medicines safely

At our last inspection the provider had failed to robustly assess the risks relating to the health, safety and welfare of people. This was a breach of Regulation 12 (Safe Care and Treatment) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. Not enough improvement had been made at this inspection and the provider was still in breach of Regulation 12.

- An effective system to assess, monitor and manage risks was still not fully in place. Where assessments of people's needs had identified risks, associated information had not always been updated or completed. One relative told us, "Staff don't always have the basic knowledge to care for [person] properly."
- Systems and processes to ensure medicines were managed safely were still not fully in place. For example, medicines records were not always accurate and did not fully reflect the support people required. A relative said, "We have had issues with drugs not been signed for in the book. I am worried to give him it again in case he has been given it."
- A safe robust recruitment process was not fully in place. Staff files included a process of checks to determine they were suitable for the role. However, we found errors or omissions in records associated with this process.

We found no evidence that people had been harmed, however, systems were either not in place or robust enough to demonstrate safety was effectively managed. This placed people at risk of harm. This was a continued breach of Regulation 12 (Safe Care and Treatment) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

# 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 requires improvement. At this inspection this key question has remained the same. This meant the service management and leadership was inconsistent. Leaders and the culture they created did not always support the delivery of high-quality, person-centred care. The purpose of this inspection was to check if the provider had implemented sufficient improvement to be compliant with breaches of regulation identified in the previous inspection report (published 29 October 2019). We will assess all of the key question at the next comprehensive inspection of the service.

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

At our last inspection the provider had failed to robustly assess the risks relating to the health, safety and welfare of people. This was a breach of Regulation 17 (Good governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. Not enough improvement had been made at this inspection and the provider was still in breach of Regulation 17.

- An effective quality system was still not fully in place. We identified shortfalls with medicines, the management of risk, and recruitment which had not been highlighted by the provider's quality monitoring system.
- There was a lack of oversight at manager level to ensure systems and processes were suitable or effective to drive forward the required improvements within appropriate timescales.
- Checks were completed on the management and administration of people's medicines and the recruitment of staff. However, these were not always individualised and did not include sufficient detail to provide the required assurances.
- Audits to check care records and risk assessments were insufficiently detailed to keep people safe.

We found no evidence that people had been harmed. However, systems were either not in place or robust enough to demonstrate an effective governance system was in place. This was a continued breach of Regulation 17 (Good governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.



This section is primarily information for the provider

## Action we have told the provider to take

The table below shows where regulations were not being met and we have asked the provider to send us a report that says what action they are going to take. We will check that this action is taken by the provider.

Regulated activity	Regulation
Personal care	Regulation 12 HSCA RA Regulations 2014 Safe care and treatment  Medicines were not always managed safely. Care and staff records, including risk assessments were not detailed enough to keep people safe.
Regulated activity	Regulation
Personal care	Regulation 17 HSCA RA Regulations 2014 Good governance  Systems were either not in place or robust enough to demonstrate effective governance.