

Rose Healthcare Services Ltd Ltd

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Inspection report

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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

About the service

Rose Health Care Services is a domiciliary care service located in Oldham, Greater Manchester. At the time of the inspection there was one person receiving the regulated activity 'Personal care'.

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

People who used the service said they felt safe. Staff were recruited safely and there were enough staff to provide people's care. People confirmed PPE was always worn by staff when delivering their care.

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. People received enough to eat and drink and said staff provided assistance as needed. Staff told us enough training was available to support them in their roles, with ongoing supervision also provided.

We received positive feedback from people who used the service and relatives about the care provided. People said they felt treated with dignity, respect and had their independence promoted as required.

People had detailed care plans in place regarding the care and support staff needed to deliver. There was an appropriate complaints system and people were supported to attend activities in the local community if this formed part of their daily routine.

There were systems in place for people who used the service and staff to provide feedback about their care through audits, surveys and meetings. Staff spoken with during the inspection told us they felt the service was well-led and enjoyed their roles.

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

Rating at last inspection

This service was registered with us on 17 January 2022 and this was the first inspection.

Why we inspected

The service had not received a rating since registering with CQC. This was why we inspected.

The overall rating for the service is good. This is based on the findings at this inspection.

Follow up

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?

Good ●

The service was safe.

Details are in our safe findings below.

Is the service effective?

Good ●

The service was effective.

Details are in our effective findings below.

Is the service caring?

Good ●

The service was caring.

Details are in our caring findings below.

Is the service responsive?

Good ●

The service was responsive.

Details are in our responsive findings below.

Is the service well-led?

Good ●

The service was well-led.

Details are in our well-led findings below.

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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 Health and Social Care Act 2008.

Inspection team

This inspection was carried out by an inspector.

Service and service type

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

Registered Manager

This service is required to have a registered manager. A registered manager is a person who has registered with the Care Quality Commission to manage the service. 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. At the time of our inspection there was a registered manager in post.

Notice of inspection

The first day of the inspection was announced. 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.

Inspection activity was carried out between 6 and 12 September 2022. Further inspection activity was completed via telephone and by email, which included additional information sent to us by the registered

manager.

What we did before the inspection

We reviewed information we received about the service since the last inspection. Prior to our 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 will review this at our next inspection.

At the time of the inspection, the service was not commissioned by the local authority, therefore we did not make contact with them for feedback on this occasion.

During the inspection

We spoke with one person who used the service and one relative about their experience of the care provided. We also spoke with three members of staff including the registered manager who is also the nominated individual/provider.

We reviewed a range of records. This included one person's care plan and associated medicine administration records (MAR). We also looked at three staff recruitment files. A variety of other records relating to the management of the service were also considered as part of the inspection.

After the inspection

We continued to seek clarification from the provider to validate evidence found following our site visit.

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 as good.

Staffing and recruitment

- There were enough staff employed to care for people safely. People who used the service said there were enough staff to deliver people's care and had never experienced late or missed visits. One person said, "Staff arrive on time now, although there was an issue in the past."
- Each member of staff had their own rota in place and the feedback we received was that these were well managed. One member of staff said, "From my point of view I feel there are enough." A relative also said, "The staff are always regular with their timings."
- Staff were recruited safely, with all the necessary procedures carried out.

Assessing risk, safety monitoring and management; Preventing and controlling infection

- People had a range of risk assessments in place regarding their care. These included finances, medication, fire and accessing the community. Where any risks were identified, control measures were in place about how to keep people safe.
- Staff said they had enough PPE available and people confirmed it was always worn when delivering care.

Systems and processes to safeguard people from the risk of abuse; Learning lessons when things go wrong

- People told us they felt safe as a result of the care they received. One person said, "I feel safe when the staff are here with me."
- A safeguarding policy and procedure was in place and the training matrix showed staff received training. Staff displayed a good understanding about safeguarding and how to recognise potential concerns. One member of staff said, "I have information about whistleblowing and what to do. Allegations of abuse could either be financial or sexual."
- At the time of our inspection, there hadn't been any accidents or incidents, however the registered manager was aware about how this needed to be responded to and monitored.

Using medicines safely

- People said medicines were given safely. One person said, "I always get my medicines when I should. I can do some of them myself, but the staff help with others."
- Staff completed medication administration records (MAR) and we saw these were completed accurately.
- Staff said they had completed medication training and told us this enabled them to give medicines safely and this was documented on the training matrix.
- Staff were observed giving medicines as part of competency assessments.

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 as good.

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 authorized 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 authorize people to be deprived of their liberty. We checked whether the service was working within the principles of the MCA.

- The registered manager told us they hadn't yet needed to complete a MCA assessment for anybody currently using the service, although was aware of the process should this need to be done.
- An MCA policy and procedure was in place for staff to follow when needed.
- People told us staff sought their consent before delivering care and there were signed consent forms within people's care plans covering areas such as medication, finances and confidentiality.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law ;Staff working with other agencies to provide consistent, effective, timely care; Supporting people to live healthier lives, access healthcare services and support;

- People's needs were assessed when their care package first commenced and these involved people's friends and families when possible.
- Staff monitored people's health and wellbeing and supported them to access healthcare services appointments as required such as the doctors, or dentist.

Staff support: induction, training, skills and experience

- People commented that staff had the required skills to carry out their role. One person said, "They seem well trained to me."
- Staff told us they received the appropriate training and induction to meet the needs of the people they were supporting. One member of staff said, "I was able to shadow as part of my induction and before I worked on my own. I would say I have been given enough training."
- Staff supervisions took place and gave staff the opportunity to discuss their work.

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

- People told us they received enough to eat and drink and received support from staff if this was required.
- People had specific nutrition and hydration care plans in place, and this provided staff with information about the support people needed to eat and drink. Records of people's weight were also maintained.

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 as good.

Ensuring people are well treated and supported; Respecting equality and diversity; Respecting and promoting people's privacy, dignity and independence

- People who used the service provided positive feedback about the care provided. One person said, "They are doing well and are taking good care of me. The staff are very good." A relative added, "It's all fine and (person) tells me it is fantastic. It is an excellent service which I would recommend."
- People spoke highly of the staff team saying they felt treated with dignity, respect and had their independence promoted where possible. People's care plans took into account things people could do themselves, or certain areas where they wanted to develop new skills. One person said, "The staff are very respectful towards me. I am able to do somethings myself and the staff let me do that, but sometimes I need help." A relative added, "The staff are good and very polite."
- Details were provided within care plans about any religious, or cultural requirements people had, as well as things of importance to people staff needed to be aware of.

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

- People told us they were involved in the care they received and were involved in decisions about their care. People said staff always took the time to speak with them at each visit and ask them how they wanted their care to be delivered.
- Reviews of people's care took place, and this presented people and their families an opportunity to discuss how their care was progressing and make any changes. One person said, "I did raise a concern about the timeliness of staff previously, although this has now improved."

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 as good.

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

- People and relatives told us they received personalised care and the service was responsive to their needs. One relative said, "The service has been responsive to me. When I have raised a problem, it gets addressed."
- People who used the service had their own care plan in place, with a copy held both at the office and in their own home. We found they provided staff with an overview of the care people needed to receive. Care plans captured person-centred information about people such as how people like to be supported, things of importance and how they would like to be involved in the support they received.
- People were supported to participate in activities by staff within the community if this formed part of their care package. One person said, "The staff take me out into the community and support me with whatever I want to do."

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.

- Interpreter services could be accessed as needed for people who may speak a different language. Documentation could also be provided in large print for anybody that needed it, although there hadn't yet been a need for this.
- People's care plans took into account their communication needs including sight, hearing and speech, as well as any sensory aids required such as glasses, or hearing aids.

Improving care quality in response to complaints or concerns

- People knew how make a complaint if needed and said they had seen improvement following concerns they raised.
- A complaints policy and procedure was available which explained the process people could follow if they were unhappy with the service they received.

End of life care and support

- At the time of the inspection no-one was at the end stages of life. The service had a policy and procedure in place explain the process to be followed if this was the case.

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 as good.

Continuous learning and improving care; Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- There were systems in place to monitor the quality of service provided to ensure good oversight. This included audits of medication, care plans and staff files. Spot checks and competency assessments were also carried out so that the registered manager could observe staff delivering care and make any necessary improvements.
- Systems were in place to involve people, relatives and staff in how the service was run, including the use of satisfaction surveys to obtain feedback.
- Team meetings were held and surveys sent to staff to obtain their views.

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

- The registered provider was also the nominated individual. They understood their role and responsibility to submit statutory notifications, although at the time of the inspection there hadn't been any notifiable incidents.
- It is a legal requirement for the ratings from the last inspection to be displayed on any websites operated by the provider and at the office location. We reminded the manager and provider about this responsibility once the overall rating for the service has been awarded.

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

- The staff team spoke of a positive culture at the service and said they enjoyed their roles. One member of staff said, "Everything is going fine here and it is a good place to work."
- Staff told us they felt the service was well-led. One member of staff said, "There is good management here." Another member of staff said, "Leadership is good and I don't have any complaints."
- People were supported to achieve good outcomes which had enabled them to improve their health and develop new skills. For example, losing weight and working closely with staff to be able to achieve this.

Working in partnership with others;

- At the time of the inspection, the registered manager said their links with other organisations were limited, although this was something they were looking to work towards once they had achieved a CQC rating and had developed the service further.