

G P Homecare Limited

Radis Community Care (Henffordd Gardens)

Inspection report

Henffordd Gardens
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Date of inspection visit:
19 December 2019

Date of publication:
10 January 2020

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

Radis Community Care (Henffordd Gardens) is an extra care supported living service providing personal care to nine people aged 65 and over at the time of the 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

People were cared for by knowledgeable, skilled staff who knew how to keep them safe and protect them from avoidable harm and meet people's needs. People had their risks assessed and staff were guided to manage these safely. People had their medicines as prescribed and there were safe systems in place to monitor this. Staff understood and followed infection control and prevention procedures. Systems were in place to investigate and monitor incidents and accidents to ensure actions were taken to mitigate risks.

People's needs were assessed, and care was planned to meet legislation and good practice guidance. People were supported by staff who were trained, and skills maintained to ensure people's needs were met. 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 were in place to support this practice.

People received support from kind and caring staff, who built friendships with people they supported. The management team sought people's views and acted on people's ideas for improvements. People's privacy was respected, and their dignity maintained.

People had their needs met, and the service was adaptable to meet any changes in their needs. Staff had the information they needed to provide personalised support and understood people's health needs. People's concerns were listened to and changes made to improve the service. When people needed support at the end of their life there were skilled staff and systems in place to meet people's needs.

The management team were open, approachable and cared about people and the quality of the service provided. People knew the management team and staff and were confident with them. The management team continually monitored the quality of the service and ensured improvements were sustained. The management team and staff established good relationships with other professionals and links in the community.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk
This service was registered with us on 10/01/2019 and this is the first inspection.

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?

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

Radis Community Care (Henffordd Gardens)

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 team consisted of one inspector.

Service and service type

This service provides care and support to people living in a 'supported living' setting, so that they can live as independently as possible. People's care and housing are provided under separate contractual agreements. CQC does not regulate premises used for supported living; this inspection looked at people's personal care and support.

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 and professionals who work with the service. We used all of this information to plan 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 took this into account when we inspected the service and made the judgements in this report.

During the inspection

We spoke with five people who used the service and two relatives about their experience of the care provided. We spoke with four members of staff including the operations manager, registered manager, a team leader and care staff.

We reviewed a range of records. This included five people's care records and multiple medication records. We looked at two staff files in relation to recruitment and 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 provider to validate evidence found. We looked at quality assurance records. We spoke with two professionals who regularly visited the service.

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

- People told us they felt safe because staff listened to them.
- Staff had a good understanding of how to protect people from potential abuse. They had received training, and they explained how they would take action to ensure concerns were investigated.
- The registered manager had systems in place to safeguard people and had reported any identified concerns appropriately.

Assessing risk, safety monitoring and management

- People said they felt safe and staff supported them to manage their risks. For example, one person explained how staff helped them to mobilise safely and supported them to improve their independence. We saw there was clear guidance for staff to follow that considered the person's own wishes.
- Staff had a good understanding of people's risks and had up to date guidance to mitigate these and keep people safe. For example, one member of staff described how a person needed specific support with their shopping and encouragement to manage a health condition. Staff understood the risks, and the information was recorded, and guidance shared in the care planning documents.

Staffing and recruitment

- People said they had regular staff and knew them well. One person felt there was sometimes a lack of staff. They said they knew this because the registered manager would sometimes provide support, and sometimes staff would appear rushed. However, people said they had the support they needed and knew if someone would be late or if there would be a change of staff.
- Staff said there were usually enough staff on duty to support people, and the registered manager would always support the team when needed.
- The registered manager explained there had been some staff leave and they had new staff in the pipeline to ensure there were sufficient staff. She explained there was support from staff at other services whilst they had been recruiting.
- Staff we spoke with told us they had provided references and there were checks in place to ensure they were suitable to be employed at the service before they started working. We saw this practice was reflected in staff files.

Using medicines safely

- People said they always had their medicines as prescribed.
- Staff had received training and senior staff completed checks to ensure they followed best practice. There were robust checks in place to ensure people had their medicines as prescribed.

- The management team had systems and processes to ensure safe administration of medicines was completed. When errors were identified action was immediately taken to ensure people remained safe. There was a high number of medicine recording errors over the last few months that the management team had identified and actioned with staff. We saw these errors were now reduced.

Preventing and controlling infection

- People told us staff followed safe practice to reduce the risk of infection.
- Staff had been trained and had a good understanding of best practice to manage the risk of infection. For example, using protective equipment when needed.

Learning lessons when things go wrong

- Staff understood how to report accidents and the management team investigated and followed up the incident to ensure all actions needed were completed.
- The management team reviewed accidents and incidents to identify trends and any learning from the incident. For example, identifying the need for specialist equipment that was then arranged for one person.

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

- When the management took over the service they assessed people already living at Henffordd Gardens and then planned the support people needed from this information. New people moving into the service continued to have a full assessment and the management team documented their needs and preferences in relation to their support and planned their care from this information.
- We saw information on best practice guidance was available for staff and shared with staff by the management team.

Staff support: induction, training, skills and experience

- People said staff knew them well and understood how to meet their needs.
- Staff told us they had completed induction training right from the beginning of their role. They said they were introduced to people as part of their shadowing to ensure best practice knowledge was shared with them. They had all the information they needed to ensure they supported people well. They also told us the team leaders team completed competency checks so they were confident with their role.
- We saw ongoing training updates were arranged for staff, and staff completed the care certificate. Staff said they were encouraged to further develop their knowledge and skills through vocational training. Staff were completing different areas of training to share with other staff. For example, one staff member was completing nutrition training to enable them to support people living at the service.

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

- People told us staff knew what support they needed and offered them choice with what they wanted to eat. One person said staff guided them to make healthy choices through different suggestions, they found this really helpful.
- Support offered to people varied dependant on their individual needs. People were encouraged to be as independent as possible.
- Staff were knowledgeable about how to meet people's nutritional needs, and made appropriate referrals if people needed additional support.

Supporting people to live healthier lives, access healthcare services and support. Staff working with other agencies to provide consistent, effective, timely care.

- People said staff had supported them to access healthcare services when they needed support. People told us staff would support them for GP appointments or contact community nurses if they were unwell.
- Staff were aware when support was needed to attend a health appointment and worked with the person to meet their needs.

- Staff understood people's health needs and were knowledgeable about people's health conditions.

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.

- People told us staff respected their wishes and always asked before they supported them.
- The registered manager had systems in place to ensure people were supported with decisions when needed within the law.
- Staff had completed training and understood how to support people lawfully.

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 good. 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 told us staff were all kind and compassionate about their needs. One person explained how staff supporting them made a huge difference to their day and really helped them to feel part of the world. The went onto say how each staff member took the time to listen and consider their needs.
- Relatives told us all the staff were brilliant and cared for their family member.
- Staff were passionate about people's human rights and considerate about issues related to equality, diversity with regards to people they supported. One person told us how staff had supported them to achieve their wishes to access the community and this had made a difference to their life.
- The professionals we spoke with told us staff communicated well and ensured people were well supported.

Respecting and promoting people's privacy, dignity and independence

- People said staff supported their independence and only helped with what they needed support with. One person said this had really made a difference to how they felt and this was really important to their well-being.
- People told us staff respected their privacy and dignity and always knocked and identified themselves before they entered their home. Relatives told us staff always maintained their family members dignity and listened to their wishes.
- All the staff we spoke with were passionate about people they supported and spoke of respecting their wishes and encouraging people to achieve them with their support. The registered manager told us with the increased staff team she was implementing individual keyworkers to further support people achieve their goals and wishes.

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

- People said they were in control of making decisions about their day to day support. They said staff really listened to their ideas and supported them.
- People and relatives were regularly asked for feedback to ensure they were happy with the support staff provided. The management team regularly checked their support to ensure people were happy with all aspects of this. Questionnaires were completed, and people were positive about the support they received.
- Relatives said communication was very good, they were involved in how their family member was supported and were kept included and updated by staff and the management team.

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 good. This meant people's needs were met through good organisation and delivery.

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

- People said they had relationships with staff, who understood their needs and their preferences and supported them well.
- Staff were knowledgeable about people they supported. Detailed information had been gathered from people and their families to identify each person's support needs, preferences and history. The management team were updating care documents to ensure additional information learnt was shared with all staff.
- Records included clear guidance and information for staff about people's histories and preferences. They also included detailed information about their health needs and the care people required to manage their long-term health conditions.
- People and their families told us the management team and staff were flexible and adaptable to meet their needs. For example, one person explained how staff would move the day they received their support if they needed them to. People said their support was regularly reviewed to ensure they were happy with the arrangements.

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.

- Staff explained how they communicated with people to understand their wishes through knowing them well. When people were sometimes less able to communicate verbally, staff understood them and had systems in place to ensure people were safe and had their needs met.
- The management team were aware of the accessible communication standards and ensured people had access to their information. For example, they had information in different formats when it was needed.

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

- Some people had access to the community and the choice of events and interests as part of their agreed package of care.
- People told us staff would help them access what they needed. For example, one person said they went shopping with staff, which they really enjoyed.

Improving care quality in response to complaints or concerns

- People and their relatives knew how to raise concerns if they needed to. One person explained they would say if there were any issues, however, they had not had any complaints with this service.
- The management team had a complaint policy and procedures to review any complaints to ensure they acted on concerns raised appropriately.

End of life care and support

- Staff told us they would support people with end of life care when this was needed. They were knowledgeable about people's wishes and how to respect them.
- The management team explained they would work alongside other agencies to support people in their own homes, at the end of their life.

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; 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

- People and relatives said the management team knew them well and they were approachable. One person told us they regularly spoke with the registered manager and she would listen to ideas and suggestions. One relative explained how they had discussed their family members needs at the start of the service and she had ensured staff were trained to support their family member.
- All staff we spoke with said there was an open and positive culture, led by the management team. One staff member told us the registered manager had listened to their suggestions and this had improved their confidence. All staff said they could share any concerns and the management team would support them.
- The management team were open and understood their responsibility to meet the duty of candour. When improvements were needed these were investigated and shared with people and their families, and staff.
- Relatives confirmed the management team kept them up to date and included with their family members support.

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

- People shared positive comments about their support and were happy with the service they received.
- Relatives said their family members were well supported.
- The management team were implementing systems as their service grew to ensure they kept an overview of the quality of care provided. For example, they were recording accidents and incidents to ensure they had an overview for trends and potential improvements.
- Staff were clear about their responsibilities and the leadership structure. The management team had systems in place to ensure they fully actioned any concerns.
- The management team understood their responsibilities for reporting to the Care Quality Commission [CQC] and the regulatory requirements. Risks were identified and escalated where necessary as appropriate.
- The management team monitored staff practice through spot checks and competencies, to ensure they provided quality care and followed best practice guidance.

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

- People and relatives were encouraged by the management team to feedback ideas and improvements. Questionnaires were completed, and any outcomes were actioned. For example, some people had said they

did not know who to complain to. The registered manager had ensured the management team had their photos on the newsletter people received to ensure they were easily identifiable. People we spoke with knew who they could make a complaint to.

- The management team spoke regularly with people to ensure they had a good relationship with staff who supported them. The registered manager was in the process of working with people to identify key workers to ensure people had a consistent voice.
- The registered manager sent out monthly newsletters to staff and people which included service development ideas, providing useful information and good news stories.
- We saw people and staff made suggestions for the employee of the month which rewarded staff who went the extra mile. Staff said they felt special people had put them forward for the reward.

Continuous learning and improving care

- The management team would now be meeting regularly with the provider to review the service to ensure improvements were maintained.
- The management team regularly audited all aspects of their care delivery to constantly keep the support provided under review.
- Systems were regularly reviewed to ensure they proved the information required to keep the service provision under review.

Working in partnership with others

- The social work team worked closely with the management team, and both social workers said there was a good relationship and communication between them and the staff team. For example, one person's outcome had been improved through greater independence supported in a safe way.
- The management team had established positive links with the community which benefitted the people supported by ensuring they had access to different services in the community.