

Redwood Home Care Ltd

# Redwood Home Care Office

## 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:

Redwood Home Care Office 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, they were supporting one adult with personal care.

The service also supported other adults and children with social activities only and we did not look at their support as part of this inspection. This was because not everyone using the service receives regulated activity; CQC only inspects the service being received by people provided with 'personal care'; help with tasks related to personal hygiene and eating. Where they do we also take into account any wider social care provided.

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

People were protected from harm by staff who had been trained, and were confident in recognising and reporting concerns. Potential risks to people health and wellbeing were assessed and minimised. There were enough staff to ensure people's needs were met safely. Staff had the right equipment and followed effective processes to prevent the spread of infection.

Staff had been trained and had the right skills to meet people's needs effectively. Staff were well supported and had information to meet people's assessed needs. Where required, staff supported people to have enough to eat and drink. Staff supported people to access to healthcare professionals when required, to help them maintain their health and well-being.

People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible. The policies and systems in the service supported this practice. People were fully involved in making decisions about their care and support. People and their relatives were involved in planning and reviewing care plans. The person using the service told us staff who supported them were caring and friendly. Staff respected and promoted the person's privacy, dignity and independence.

Information in people's care plans supported staff to deliver person-centred care that met people's needs. Staff had been trained on how to support people well at the end of their lives. The registered manager worked in partnership with other professionals to ensure that people received care that met their needs. There was a system to ensure people's suggestions and complaints were recorded, investigated, and acted upon to reduce the risk of recurrence.

Audits and quality monitoring checks were carried out regularly to continually improve the service. The provider had systems to enable people to provide feedback about their experiences of the service. The person's experience of the service was positive. The registered manager showed us what they had done to deal with the concerns raised about some of the people they supported. Overall, there were effective systems to ensure people received good quality care.

Rating at last inspection:

- This was the first inspection following the provider being registered with the Care Quality Commission on 22 August 2017.

Why we inspected:

- This was a planned inspection following registration with the Care Quality Commission.

Follow up:

- We will continue to monitor all information we receive about the service and schedule the next inspection accordingly.

## 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 responsive.

Details are in our Responsive findings below.

Good ●

### Is the service well-led?

The service was well-led.

Details are in our Well-led findings below.

Good ●

# Redwood Home Care Office

## 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. This inspection was planned to check whether the provider was meeting the legal requirements and regulations associated with the Act, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

#### Inspection team:

One inspector carried out the inspection.

#### Service and service type:

Redwood Home Care Office is a domiciliary care agency. It provides care to people living in their own houses, flats or specialist housing. The service provides care and support to adults and children, some of which do not receive regulated care.

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 site visit because it is small and the registered manager is often out of the office. We needed to be sure they would be in to support the inspection.

Inspection activity started on 27 February 2019 and ended on the same day. We visited the office location to see the registered manager and office staff; and to review care records and policies and procedures. The office staff included an office manager who will be registering with the Care Quality Commission soon and the human resources administrator.

We contacted the local authority safeguarding team for feedback about their investigation into concerns we knew about before the inspection. However, we did not receive a response. During the discussion with the registered manager, we found out that none of the concerns raised involved the person receiving regulated care. We therefore, did not use that information when we made our judgement about this inspection.

What we did:

Before the inspection, we looked at information we held about the service including notifications. A notification is information about events that registered persons are required to tell us about. We checked the Provider Information Return (PIR). This is a form that asks the provider to give some key information about the service, what the service does well and improvements they plan to make. We used this information to plan the inspection

During the inspection, we looked at various information including:

- Care records for the only person supported with personal care.
- Records of accidents and incidents; compliments and complaints; audits; surveys.
- Two staff files to check the provider's staff recruitment, training and supervision processes.
- Some of the provider's policies and procedures.
- We spoke with the person using the service, their relative and the staff member who provided personal care by telephone.

# Is the service safe?

## Our findings

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

People were safe and protected from avoidable harm. Legal requirements were met.

Systems and processes to safeguard people from the risk of abuse

- The person supported by the service told us they felt safe with how staff supported them. They said everything was going well and they had no concerns about potential harm.
- Staff knew how to keep people safe because they had been trained on this. The staff member we spoke with demonstrated they knew how to report concerns so that action was taken quickly to safeguard people. They said, "I will always talk to [the senior] to share concerns about people we support."
- The provider had a system to manage potential safeguarding incidents. We discussed with them incidents that had been reported to us prior to the inspection and they told us what action they had taken to deal with these. They were currently working with the local authority safeguarding team who were looking into those issues. However, none of the concerns raised involved people receiving regulated care.

Assessing risk, safety monitoring and management

- The person and their relative had no concerns about risks.
- There was a system to manage potential risks to people's health and wellbeing well. The person's care plans showed that risks had been assessed to protect them and staff.
- The person's home had also been risk assessed to ensure there were no hazards that could put them, their visitors and staff at risk of harm. The completed record showed that appropriate action would be taken to make improvements if required.

Staffing and recruitment

- There were safe staff recruitment processes to make sure staff employed by the service were suitable. The registered manager had completed all necessary checks required by the regulations.
- The checks included getting references from previous employers and Disclosure and Barring Service (DBS) reports. These helped employers make decisions about the suitability of potential staff before they started working at the service.
- There were enough staff to support people safely, and the staff member we spoke with confirmed this.
- The person and their relative told us of the two staff members who consistently supported them. They were happy with both.

Using medicines safely

- The service was not supporting anyone to take their medicines.

Preventing and controlling infection

- Staff told us, and records showed they had been trained in infection prevention and control. They also had supplies of protective equipment, such as gloves if required when supporting people.
- Staff also supported people to keep their homes clean and comfortable for them. The person we spoke

with confirmed this when they said, "They help me with cleaning too."

#### Learning lessons when things go wrong

- Apart from the incidents reported to us and the local authority under safeguarding procedures, there had been no other incidents or accidents recorded. However, we saw that the provider had systems to ensure these could be managed effectively.
- Staff knew they needed to inform the registered manager of any incidents that occurred so that action could be taken to reduce the risk of recurrence.

# 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

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; Adapting service, design, decoration to meet people's needs

- The service was meeting people's needs effectively. The person supported by the service they were happy with how staff supported them and their care needs were met well. They also said, "Their support is really good. They help me with bathing, shopping and they also take me out when I go out socialising."
- The person's care plans showed how their care needs, choices and preferences would be met by staff.
- There were systems to continually assess people's care and support needs to ensure they received effective care. The person's care plan was not due to be reviewed yet, but there were systems to update these periodically or when people's needs change.

Staff support: induction, training, skills and experience

- Staff were trained to gain knowledge and skills necessary for them to support people effectively.
- The staff member told us of the induction and training they had completed when they started working at the service. They said they found this useful in their work and informative. They also said they had to complete a 'knowledge test' to show that they understood what they were learning.
- We saw that the provider had a system to formally support staff through supervision. The staff member told us they always felt supported in their work as they could speak with the managers whenever they needed to. They added, "I had supervision with [office manager] and I found this useful."

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

- The service was not supporting anyone with their food at drinks.

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

- The person told us they and their relative managed this without needing support from staff.

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 with appropriate legal authority.
- We checked whether the service was working within the principles of the MCA and found these were met. The person using the service had capacity to make decisions and they had given consent to their care and

support.

# 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

People were supported and treated with dignity and respect; and involved as partners in their care.

Ensuring people are well treated and supported; equality and diversity

- The person using the service told us they were happy with the staff who supported them. They also said, "[Staff member] supports me very well and is good. They're both always kind."
- The relative said, "The two staff who support [person] are very good and lovely with [person]."

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

- The person told us they always made decisions and choices about how they wanted to live their life, and how they wanted staff to support them.
- The person's care plans had been developed with them and their relative. They were happy with this as it ensured their wishes were always considered.
- The staff member told us the person they supported could always tell them how they wanted to be supported. They said, "[Person] will tell you what she needs and I'm always happy to go along with that."

Respecting and promoting people's privacy, dignity and independence

- The person and their relative told us they always found staff to be respectful.
- The person told us they could carry out some of their activities of daily living, but they needed staff support to do some things.
- They were happy with everything staff did for them to make sure they could live independently in their own home. Their relative was happy too.

## Is the service responsive?

### Our findings

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

People's needs were met through good organisation and delivery.

Planning personalised care to meet people's needs, preferences, interests and give them choice and control

- People's care and support needs were being met by the service in a personalised way.
- The person we spoke with said the care provided by staff reflected their care needs and preferences. They told us about the support they received from staff with personal care for two days a week and they were happy with this.
- The person also told us about the support they received to keep their home clean, to go out shopping, and to access social activities in the community. They and their relative were happy that this support allowed the person to access things they enjoyed doing.

The relative said, "So far so good. We have had them for nearly a year now and have had no problems."

Improving care quality in response to complaints or concerns

- The provider had a system to manage people's concerns and complaints.
- The person and their relative told us they were happy with how care was managed and had no reason to complain.
- The relative said any issues were normally resolved very quickly. They also said, "There has been better communication since [office manager] took over."

End of life care and support

- No one supported by the service required end of life care and therefore, the registered manager had not added this information in the person's care plans.
- We discussed with the registered manager that they needed this information for everyone they supported with personal care so that staff knew how people wanted to be supported at the end of their lives. They told us they would speak with the person to check if they wanted to include this information in their care plans and add it if the person agrees.

# 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

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

Planning and promoting person-centred, high-quality care and support; and how the provider understands and acts on duty of candour responsibility; Continuous learning and improving care

- The registered manager and the office manager carried out regular audits of care records, staff files and their quality monitoring systems. This meant they could regularly identify areas of the service that required improvement, and make those improvements in a timely way.
- The office manager explained how they used information from audits to improve the service. For example, staff training was booked for March 2019 when audits of daily records showed these were not always written in a person-centred way.
- There was a service improvement plan which was reviewed monthly as part of the service performance review. This showed how the service performed against the Care Quality Commission's key questions: Safe; Effective; Caring; Responsive and Well-led. Overall, this inspection found the provider was meeting the expected standards.
- The registered manager had appropriately responded to concerns raised about the support of some people using the service. They shared relevant information with us and the local authority who are leading the investigation into the concerns raised. However, none of the concerns related to the person receiving regulated care and we therefore, did not use this information to inform this inspection.

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

- The member of staff we spoke with told us they enjoyed their job and they found the service good. They said they received the necessary support they needed to do their job well so that they provided safe, effective and good quality care. They were happy with the level of communication with the managers.
- The provider had a reward scheme nominated as the 'employee of the month'. They told us they wanted to reward staff who went over and beyond expected levels of care or support for people using the service. The member of staff we spoke with was aware of this.
- The registered manager told us of their plans for the office manager to become the registered manager soon. This would enable to remain the nominated individual while working part-time to maintain their professional skills and registration.
- The office manager had been previously registered to manage similar services and they showed a lot of experience when we spoke with them. Feedback from everyone we spoke with was positive about their skills.

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

- We saw evidence of regular verbal, telephone and email communication with the person using the service or their relative where they provided feedback about the service. The provider had sent out a survey to everyone using the service and were waiting for the responses.
- Staff had regular meetings to discuss issues relevant to their roles. We saw minutes of the meeting held in January 2019, which showed 14 staff had attended. The registered manager also sent regular emails to share information about guidance or lessons learnt following incidents. For example, an email sent on February 2019 reminded staff about the Mental Capacity Act 2005. This gave them an example of a person they were currently supporting with social activities because they needed support with their money.
- Managers also met monthly to assess the quality of the service. Weekly reports to the provider formed the basis of these discussions, and there was evidence that they took appropriate actions to continually improve the service.

#### Working in partnership with others

- The service worked in partnership with health and social care professionals who referred people to the service. This ensured everyone could check that people consistently received the support they required and expected.