

Mrs Lynn Mears

Rendezvous

Inspection report

6 Coxes Road
Selsey
Chichester
West Sussex
PO20 9AN

Tel: 01243605782

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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:

Rendezvous is a domiciliary care provider. At the time of inspection, they were providing personal care support to one person.

Not everyone using Rendezvous receives a 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 consider any wider social care provided.

People's experience of using this service:

The person received a consistently good service. They told us that they felt very safe and that the staff looked after them well. "They make sure I am all right, they look after me and make sure I am well."

The person received kind and compassionate care from staff who knew them well. Staff were described as "really kind". The person told us that they felt listened to and really appreciated that time that staff spent with them.

Staff knew what action to take to keep the person safe and who to contact if they had any concerns.

The person received personalised care that was responsive to their needs and ensured they had maximum choice and control over their life.

Staff provided support to maintain the person's health and to access health care services when they needed them.

The service was well led by a dedicated provider who demonstrated compassion and commitment to the person who was receiving a service and the staff who worked for them.

Rating at last inspection:

Good (12 August 2016)

Why we inspected:

We inspected the service as part of our inspection schedule methodology for 'Good' rated services.

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

Follow up:

We will continue to monitor the intelligence we receive about this home and plan to inspect in line with our re-inspection schedule for those services rated Good. The current service is supporting one person with a regulated activity, if the service grows during this time we may inspect sooner to ensure the service can support more people.

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 on our Responsive findings below.

Is the service well-led?

Good ●

The service was Well-led.
Details are in our Well- led findings below

Rendezvous

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:

The inspection was completed by one CQC inspector.

Service and service type:

Rendezvous is a domiciliary care agency. It provides personal care to people over 18 living in their own homes.

The service had a provider registered with the Care Quality Commission. This means that they 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 24 hours' notice of the inspection visit because it is small and the manager is often out of the office supporting staff or providing care. We needed to be sure that they would be in.

What we did:

We reviewed notifications the provider had submitted. A notification is information about important events the provider is required to tell us about by law. A PIR is information we require providers to send us to give some key information about the home, what the home does well and improvements they plan to make.

We looked at the information we held about as well as information received from the service.

For example:

- ☐ Notifications we received from the service
- ☐ One person's care records
- ☐ Records of accidents, incidents and complaints
- ☐ Audits and quality assurance reports
- ☐ Spoke with two staff including the provider.

Is the service safe?

Our findings

Safe – this means 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; Assessing risk, safety monitoring and management; Staffing and recruitment; Using medicines safely; Preventing and controlling infection; Learning lessons when things go wrong.

- The person told us that they felt safe, they like the staff and felt that they provided good support.
- Staff had received safeguarding training and had a good awareness of how to protect people from potential harm and how to report concerns.
- Risks associated with the persons care and wellbeing were identified and managed appropriately. There was a positive approach to risk taking which supported the persons independence.
- The person knew how to seek help and who to contact if they needed additional help or found themselves in an emergency. Staff supported the person to know what to do in the event of a fire.
- The person was protected from the risk of infection. Staff had access to personal protective equipment (PPE) such as gloves and aprons which they used appropriately.
- The person was protected by safe recruitment practices. New staff were appointed after robust checks were completed which ensured they were of good character to work with people who had care and support needs.
- The provider has a process to review and learn from incidents and prevent a reoccurrence. Outcomes were shared with staff to ensure appropriate action was taken to ensure peoples safety and mitigate further risks.

Is the service effective?

Our findings

Effective – this means 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; Staff support: induction, training, skills and experience; Supporting people to eat and drink enough to maintain a balanced diet; 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 before they started to receive support from the service. The person told us that staff knew them well, for example they like football and staff knew their favourite team. At birthdays and Christmas, they received gifts that were football related and this was important to them.
- Staff received training that was appropriate to their role. They received regular supervision and an annual appraisal and records confirmed this. Staff said that the support and guidance they received from the provider was very good.
- Staff worked together to deliver effective care and support. They ensured that support needs were met in line with the persons personal preferences. The person told us "The staff are good, they know how to support me with things."
- The person had good access to healthcare. They told us that they were reminded to attend regular health appointments and they could ask staff to attend with them when they needed to.
- The person told us that they appreciated the support that staff gave them. Staff had a good understanding of how to support the person with budgeting for day to day expenditure such as food and paying bills.
- Staff knew how to promote and encourage the person to maintain their independent living skills in areas such a cooking, and offered dietary guidance and advice when needed.

Ensuring consent to care and treatment in line with law and guidance

The Mental Capacity Act 2005 (MCA) provides a legal framework for making 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 decisions, any made on their behalf must be in their best interests and as least restrictive as possible".

- We checked whether the service was working within the principles of the MCA and found that they were. Staff were aware that the person had full capacity and control over all aspects of their life. They were respectful of this and always sought the persons permission before supporting them with personal care and support.

Is the service caring?

Our findings

Caring – this means 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; respecting equality and diversity; Supporting people to express their views and be involved in making decisions about their care; Respecting and promoting people's privacy, dignity and independence

- Staff were described by the person as caring and kind. We were told that staff helped the person to keep in touch with a family member which was very important to them.
- The person told us that it was good having staff that lived close to them as this made them feel safe.
- Staff respect the person's decision making and worked with the person to ensure their safety and wellbeing within this process. The person followed personal interests and staff were familiar with the support the person may need at times with this.
- The person told us that staff were local to the area and had worked in the village for many years. They said that it was good that the provider knew them from that time in their life and enjoyed talking about it with them.
- Staff told us that they really enjoyed their job. One said, "I wished I had done this years ago". They said that they really appreciated being able to support the person and having a positive impact on their life.
- The person's dignity was respected and they were treated with compassion and by staff who were trained and knew them well.
- The provider and staff were aware of the principles of equality, diversity and human rights (EDHR) and this ensured that they provided support fairly regardless of age, gender or disability.

Is the service responsive?

Our findings

Responsive – this means 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;
Improving care quality in response to complaints or concerns;

- The person received a person-centred service that was responsive to their needs and preferences. They were involved in the planning and review of their care. For example, the person told us that at Christmas they like to go to the Town Hall for Christmas lunch and staff support them to ensure this happened.
- The person had a detailed personalised support plan. This gave guidance to staff on how the person wanted to be supported. The person could change their support plan when they needed to or when their personal preferences had changed. This ensured that the person received consistent care in line with their personal preferences and assessed needs.
- The provider was aware of the person's preferred method of communication and those that they did not like. The person's support plan reflected this and measures were in place to ensure that the person had access to effective communication which suited their personal preferences.
- This demonstrated the provider's understanding of the Accessible Information Standards (AIS). The 'standard' sets out a specific approach to identifying, recording and flagging, sharing and meeting the information and communication needs of people who use services. The standard applies to people with a disability, impairment or sensory loss and in some circumstances their carers.
- The person told us that they felt listened to by staff and the provider. They knew how to make a complaint and said that they felt "OK talking to staff about things" If there was a problem they felt that staff would help them to resolve it.
- The person valued their independence and being able to make decisions and choices about their life. They told us that they could seek advice and talk about personal safety with staff and they were involved in planning of their support.
- The person supported was encouraged to maintain links with the local community and use local facilities. They were familiar with the shops in the high street and used local cafes and health facilities.

Is the service well-led?

Our findings

Well-Led – this means 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 with openness; and how the provider understands and acts on their duty of candour responsibility; Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Continuous learning and improving care; Working in partnership with others

- The person supported, and the staff told us, that they considered the service to be well managed. They told us that they had not found any problems with the provider or the management of the service.
- Staff told us that the support they received from the provider was very good, and we received good comments about how the service was led. One staff member said, "I have very good contact with the provider, I feel really supported and valued"
- The provider had a clear vision to respect individual choice and promote inclusion, rights and independence. It was evident through observations, conversations and documents that person centred care was embedded within the service, and staff were committed to providing the best care they could.
- The provider was aware of their responsibility to comply with the CQC requirements of their registration. They had notified us of events that had occurred within the service so that we could have an awareness and oversight of these to ensure that appropriate actions had been taken.
- The person receiving support told us that they saw the provider regularly and on the morning of the inspection the provider had been supporting the person. The provider knew the person well and the person supported told us that this was important to them as they enjoyed time spent talking with the provider.
- Support is provided to people in their own homes. People can choose to have their care provided by Rendezvous domiciliary care agency or another provider of their choice.
- Systems and processes were in place which ensured that there was clear provider oversight of the service. Monthly audits of accidents and incidents were completed and the information was used to highlight any trends or mitigate risks of a further occurrence.
- People's views of the service were sought and these were used to inform service development and recorded within care planning records.
- The service currently provides a regulated activity to one person, if the service grows, CQC may inspect the service sooner than the usual guidance for services rated as Good to ensure the service can support more people.