

Shield Recruitment Limited

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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 

Overall summary

We undertook an announced inspection of Shield Recruitment on 11 August 2015. We gave the provider 48 hours' notice of our visit to ensure that the Registered Manager of the service would be available.

Shield Recruitment provides personal care services to people in their own homes. At the time of our inspection only one person was receiving a personal care service.

At our last inspection in June 2013 the service was judged to be meeting all of the regulations we inspected at that time.

The service had a registered manager in place. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.

Summary of findings

Care workers, the person who used the service and their relative told us they were able to speak to the registered manager if they had any concerns. Care workers had received supervisions every three months and yearly appraisals.

We spoke to the person who received care/support from the agency, one relative and two care workers. The person we spoke with said that they felt safe in their home whilst care and support was provided.

Records we looked at and in our discussions with care workers we found care workers received regular training and were knowledgeable about their roles and responsibilities. They had the skills, knowledge and experience required to support people with their care and support needs.

The person who used the service told us they were supported to eat and drink. Family and care workers supported them to healthcare appointments and provided personal care as required to meet the person's needs.

Shield Recruitment had a complaints procedure in place. People who used the service, their relatives and staff knew how to complain. No complaints had been received since the last inspection.

There was an accident and incident file in place within the agency. At the time of our inspection there had been no accidents or incidents.

Summary of findings

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.

Care workers had a good knowledge of safeguarding procedures and how to put these into practice.

Risk assessments were in place.

There was a robust recruitment policy in place.

Good



Is the service effective?

The service was effective.

Care workers had the skills and knowledge to meet people's needs.

Care workers received three monthly supervisions and yearly appraisals.

The person who uses the service was supported to access healthcare appointments.

Good



Is the service caring?

The service was caring.

The people we spoke with told us that care workers spoke to them in a kind and respectful manner.

The person's relatives told us they felt that their family member was being well cared for.

The person made their own decisions and care workers respected this.

Good



Is the service responsive?

The service was responsive.

The service responded to the needs of the person through ensuring consistent care workers supported the person in their home and in the community.

A support plan was in place at the service.

People were confident that the registered manager would deal with any complaints or concerns.

Good



Is the service well-led?

The service was well led

Care workers told us they were supported by the registered manager and they could take any concerns to their manager.

The home was looking at new mechanisms to put in place which would allow people using the service and their relatives to provide feedback on the service provision

Good



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Detailed findings

Background to this inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection was planned to check whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

The inspection took place on 11 August 2015 and the visit was announced. We gave the provider 48 hours' notice of the inspection. We did this to make sure the registered manager would be at the service as sometimes the registered manager is out of the office supporting care workers or visiting people who used the service. This inspection was carried out by one adult social care inspector.

Prior to inspection we reviewed all the information held about the home. The provider had not been asked to provide a provider information return (PIR). This is a document that provides relevant up to date information about the agency that is provided by the manager or owner of the agency to the Care Quality Commission.

We spoke to the person who received care/support from Shield Recruitment, one relative and two care workers.

During the inspection we went to the providers head office and spoke to the registered manager. We reviewed the support plan of the person that used the service, reviewed the records of two staff that supported the person, and the records relating to the management of the service. We spoke on the phone with two care workers. We visited the person who used the service and one relative of person who used the service in their own home.

Is the service safe?

Our findings

The person we spoke with told us they felt safe using the service. The person told us, “I feel safe with the staff,” and they told us they felt staff always had their best interests at heart, and were willing to help them if they had any specific concerns.

Care workers had completed training in safeguarding vulnerable adults. This was evidenced in their staff file and also through us speaking with the care workers. The service had a safeguarding policy in place and the registered manager told us that all staff had received a copy of this during induction, which care workers confirmed at the time of our inspection. Care workers were knowledgeable in recognising signs of potential abuse and how to report any concerns. Care workers said “I would speak to my manager if I had any concerns.”

The person told us that they did not take medication. The person said that when they required medication it was their family who supported them with this and not the care workers.

We saw risk assessments were completed to assess any risks to the person using the service and for staff who were supporting them. Risk assessments were in place around moving and handling of the person in their home. Training on moving and handling and also the use of any equipment including hoists were completed by both staff. Care workers had completed an induction period before working alone in the person’s home. This was evidenced through the care workers files and also through discussion.

We saw that there was an accident and incident file in place. There had been no accidents or incidents since the last inspection. The care workers said they would report any straightaway to the registered manager so that appropriate action would be taken.

There were enough care workers to keep the person safe. The person used the service only in an emergency when the regular support staff were on annual leave. Shield Recruitment use the same two care workers for support to ensure the person were safe and received consistent care.

The person who received care from Shield Recruitment had the capacity to make their own decisions at the time of our inspection. The family were involved in developing the support plan with their relative to identify any needs that were required from the service and how this would be carried out.

Recruitment procedures were in place and the required checks were undertaken before care workers could work for the agency. All care workers had been checked with the Disclosure and Barring Service (DBS). The registered manager said that applicants attended an interview to assess their suitability for the job and we saw this evidenced in their file. All contracts were in place and signed by staff before starting their role. Care workers undertook an induction programme with the agency. Care workers also shadowed senior staff and attended all mandatory training before commencing work at the agency.

Is the service effective?

Our findings

The person we spoke with felt that their care workers were well trained, competent and behaved in a professional manner. One person told us about her (family member) care workers, saying, “They understand all her needs, I think they’re very well trained, and they employ the right sort of people.” They said “the staff are excellent.”

The person was supported in their home and in the community by staff that had the knowledge and skills to meet their needs. Training was completed for all staff both face to face training and e-learning. Care workers who spoke with us confirmed that all training had being completed and that on-going training was available.

The Mental Capacity Act (2005) covers people who can’t make some or all decisions for themselves. The ability to understand and make a decision when it needs to be made is called ‘mental capacity’. We looked at staff training records and saw that both staff had completed the training. This helps ensure all staff have the knowledge and understanding of the Mental Capacity Act (2005).

Care workers told us that they sometimes supported the person to healthcare appointments if they were asked to do so. This meant that care workers were ensuring the persons health and welfare were at the focus of what they do.

Care workers received supervisions and appraisals from their manager. The agency’s policy stated that supervisions were completed four times a year.

Care workers were introduced to the person they supported before they commenced their role. The registered manager said that the two care workers visited the person and had an induction with the person in their own home to look at their individual support needs. This meant the service was meeting the needs of the person.

The person was supported at mealtimes with their own choice of food and drinks. The person we spoke with told us they were happy with the levels of support given to them in regard to preparation of food and drink. They told us that they told the care workers what they wanted to eat and drink and that staff supported them with this. Drinks were always offered and made on request. Care workers had received training in food and safety which was evidenced in their file and also in discussion with staff they confirmed they had completed this training.

We were told by the person using the service and their relatives that all healthcare appointments are made by themselves or their relatives.

The support plan included all details of their GP. The support plan also included how the person chose to be supported.

Is the service caring?

Our findings

The person who uses the service spoke glowingly about their care workers. The person told us, “They’re more like friends now than carers – they treat me so well.” The person went on to say “they are excellent both of them.”

The person was complimentary about the levels of involvement they had with their care, telling us care workers always asked for their permission before care was provided. The person told us, “They’ll always ask if I need anything else done before they go home. Nothing’s ever too much trouble for them.” They said “The staff are great they come out with me and support my needs when I am out in the community.”

The relative we spoke with told us that their family member was fully involved in their own support plan and that they were also involved in their relative’s care, and felt they would always be listened to if they needed a care package to be reviewed, or amended. The family were involved and this was evidenced in the support plan.

Care workers spoke about the person with genuine affection, telling us that they got real job satisfaction when they knew they have made a difference to someone, or left someone feeling happier than when they arrived. One care worker told us, “I have been supporting this person for a long time now and they make me feel very welcome in their own home.” The care worker said that they were aware of confidentiality around supporting the person in their home and in the community.

We saw when we visited the person in their home that she looked well dressed and cared for. For example, we saw she was wearing jewellery and she had manicured nails and hair was nicely styled. This indicated that care workers had taken the time to support the person with their personal care in a way which would promote their dignity and in line with the people preferences.

Is the service responsive?

Our findings

Care workers were knowledgeable about the preferences and interests of the person they supported.

The care workers were also aware of any health and support needs people needed to provide them with a professional and personalised service. The person who used the service told us that they arranged their own appointments; however sometimes workers care would attend appointments with them.

Care workers supported the person to access local communities, shops and outings to minimise the risk of the person becoming socially isolated. The person is a keen rugby fan so attends all the matches with staff support. The person said "I have a very active social life and I am out every day and I have staff to support me in everything I do when out in the community doing activities."

Support plans were in place for the person who used the service. Support plans showed the persons interests and current needs which staff had access to in the office and in the home to be able to support the person.

The person was encouraged to maintain their independence and undertake their own personal care where possible. One care worker said "I always encourage the person to do as much of their own personal care as they can."

The provider had a complaints procedure in place and the registered manager told us that all complaints would be acknowledged and responded to within set timescales and a thorough investigation would be always carried out. We saw no records of any complaints. We spoke to the person who used the service and they confirmed that they had not made a complaint, but were aware of how to make one.

Is the service well-led?

Our findings

Care workers told us that the agency was well led and that they would be listened to if they raised any concerns. The person who used the service and their family also said that they could approach care worker or the registered manager with any concerns.

The registered manager produced a weekly report which identified and recorded all hours undertaken by the staff. This meant that the person receiving the care from the care workers knew exactly when she had received care and an audit trail for this was in place from Shield Recruitment.

We spoke with the registered manager about the governance of the service and it was evidenced by the system that the registered manager had in place and feedback by family that they were committed to having a robust quality assurance monitoring system.

We saw the registered manager audited the person's support plan and risk assessments. The registered manager confirmed there were no identifiable trends or patterns in the 12 months of working at the service.

We saw the registered manager audited the care worker files and checked the staff training matrix on a routine basis to make sure they provided accurate and up to date information.

The registered manager told us about questionnaires they had sent out the person and their family in September 2014 asking for their views about the service. This was evidenced at the time of our inspection. The survey had not being completed or sent back to the service. The registered manager was in the process of looking into ways to gaining feedback through other means to ensure that they received feedback on their care.