

Reliant Care Limited

# Reliant Care Ltd

## Inspection report

200 Northolt Road  
Harrow  
Middlesex  
HA2 0EN

Tel: 02088936770

Website: [www.reliantcare.co.uk](http://www.reliantcare.co.uk)

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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: Reliant Care Ltd is registered to provide personal care to people in their own homes and in supported living settings. Most people who used the service lived with mental health needs. Reliant Care Ltd provided a mental health step down service that supports people to develop the skills and confidence that they need for living independently in the community. Reliant Care Ltd also provided a service for people who have learning disabilities or autistic spectrum disorder and other needs including those who misused drugs and alcohol. We were informed that two people currently received help with their personal care. There were occasions when other people using the service required prompting in relation to their personal care.

People's experience of using this service:

People were provided with a service that was personalised, met their individual needs and preferences and prompted their independence.

Staff knew people well and understood their needs. Staff were provided with the training, support and guidance they needed to carry out their role and responsibilities. This included providing people with individualised care and support.

People's care was planned with the involvement of people using the service. People were encouraged to make decisions about the support that they needed from staff and to make choices about their lives.

People received consistency of care and support from a staff team that communicated well with each other about people's needs. Staff told us they were kept well informed about people's current needs and always reported any changes in people's needs to the registered manager and to other staff.

People told us that they were satisfied with the service they received. We saw staff engage with people in a respectful and friendly way. Staff listened to people and respected the choices they made about their day to day lives.

There were opportunities for people to follow their interests and take part in activities that they enjoyed. People were supported to develop their skills so that they were more able to live independently within the local community.

Staff we spoke with understood the importance of respecting people's privacy and dignity. They had a good knowledge of people's equality and diversity needs and spoke of the importance of respecting people's differences.

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.

The service assessed and managed risks to ensure that people received personal care and support safely.

Systems were in place to assess and monitor the quality and delivery of care to people and drive improvement. Development and improvements to the services were made when needed.

People had opportunities to provide feedback about the service that they received, and action was taken to address any concerns.

The provider had systems in place to manage and resolve complaints.

Rating at last inspection: This was the service's first inspection.

Why we inspected: We inspected the service as part of our inspection schedule methodology for new registered services which had not been rated before.

Follow up: We will continue to monitor intelligence we receive about the service until we return to visit as per our re-inspection programme. If any concerning information is received, we may inspect sooner.

For more details, please see the full report which is on the CQC website at [www.cqc.org.uk](http://www.cqc.org.uk)

## 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

# Reliant Care Ltd

## 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 team consisted of two inspectors.

Service and service type: Reliant Care Ltd provides support to people living in six supported living settings and in their own flats. Reliant Care Ltd supports people to engage in recovery and rehabilitation programmes which help them to develop the skills and confidence that they need to live independently within a community environment. At the time of this inspection we were informed by the registered manager that two people using the service needed support with their personal care.

People's care and housing are provided under separate contractual agreements. The Care Quality Commission (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 (CQC). 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 two working days' notice of the inspection because the service provides care to people in their own homes and supported living settings and we wanted to make sure that the registered manager was available during the inspection site visit. We also gave notice of our visit, so the registered manager could seek agreement from people using the service to us visiting them in their supported living settings.

On the 1 May 2019 we visited the office which was located within one of the supported living services to speak with the registered manager, support workers and people using the service, and to review records. In

the afternoon we visited another supported living service that provided one person with support with their personal care.

What we did: Before the inspection we looked at information we held about the service. This information included any statutory notifications that the provider had sent to the CQC. Statutory notifications include information about important events which the provider is required to send us by law. We had asked the provider to complete a Provider Information Return [PIR]. The PIR 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 also received feedback from one social care professional and information from a report of a quality check of the service which had been carried out by the host local authority. We used this information and the previous inspection report to plan our inspection.

During the inspection we spoke with the registered manager, one other manager, the owner director, the managing director, human resource manager, office administrator, four support workers, and three people using the service. We reviewed a variety of records which related to people's individual care and the running of the service. These records included care files of four people using the service, four staff employment records and a range of other records that related to the management and running of the service.

# 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 provider had policies and procedures in place to safeguard people from abuse and the risk of avoidable harm. The safeguarding adults' policy did not clearly detail the action staff needed to take in response to an allegation of abuse. The 'How to respond to an allegation' guidance within the policy did not include information about reporting to the CQC and when required the police. Following the inspection, the registered manager told us that the safeguarding policy had been reviewed and updated so that it clearly detailed the action staff needed to take in response to safeguarding concerns.
- Staff received training in safeguarding people. The staff we spoke with were knowledgeable about types and signs of abuse. They knew they needed to report any suspected abuse to the registered manager and/or other management staff.
- The registered manager was aware of their responsibility to liaise with the host local authority if safeguarding concerns were raised. The contact details of the host local authority were accessible to staff and people using the service.

Assessing risk, safety monitoring and management

- Assessments of risk were carried out. Risk assessments included risks specific to people and to the staff supporting them, such as risks associated with aggressive behaviour, self-harm and the management of people's finances. People's risk assessments included least restrictive risk management plans to minimise the risk of people and staff being harmed. They were reviewed and updated when needed as part of ongoing reviews of people's care.
- Staff were knowledgeable about risks related to supporting people and of the guidance to manage and minimise them. They knew they needed to report any concerns to do with people's safety to the registered manager.
- A '24 hour' on call system was in place so staff could access advice and assistance at any time.
- Health and safety checks including fire safety checks were routinely carried out. Fire drills were regularly carried out. Records did not show that fire safety checks were being carried out in line with the provider's policy of completing weekly checks. Following the inspection, the registered manager told us these checks were monitored and now carried out weekly.

Staffing and recruitment

- The provider carried out appropriate recruitment and selection processes so only suitable staff were employed to provide people with care and support.
- People received consistent care and support from staff who knew people well and understood their individual needs. Staffing levels were calculated according to people's assessed needs. Arrangements were in place to ensure that staffing numbers and skill mix were flexible so that there were always enough staff to meet people's support and social needs.

### Using medicines safely

- There were policies and procedures in place to ensure that staff provided the support people needed with their medicines.
- Most people needed minimal support with their medicines. This included staff prompting people to take their medicines as prescribed and safely. Some details about the support people needed with their medicines was recorded in their support plans. However, we noted that not every person using the service had an up to date personalised self-administration medicines risk assessment. The registered manager told us that they were in the process of completing these personalised medicines assessments, and would also ensure that staff medicines competency assessments were also recorded. Staff including the registered manager confirmed that staff had received an assessment of their competency to administer medicines. However, these assessments were not recorded. The
- Regular checks of people's medicines administration records were carried out to make sure they were accurate and showed that people received their medicines as prescribed.

### Preventing and controlling infection

- Staff had received training in infection control and food safety. Personal protective equipment was available for use to help reduce the spread of infection when supporting people with personal care and carrying out tasks such as cleaning.
- The two supported living premises that we visited were both clean. Cleaning schedules were in place and the cleanliness of the services was monitored.

### Learning lessons when things go wrong

- Policies and procedures for responding to and managing accidents and incidents were in place. We saw staff had been responsive in taking appropriate action when incidents occurred to keep people and staff safe. Some records of incidents lacked information to show where improvements had been made to help reduce the risk of reoccurrence. The registered manager told us that they would ensure that this information would be recorded. They also told us they would implement a system of regular review and analysis of all incidents and accidents to determine trends and showed where lessons had been learnt.



# 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

- People's needs, and support preferences had been assessed before they started receiving a service and were updated when people's needs changed.
- The process of people moving into the service was personalised reflecting their needs and wishes. Records showed that people had visited the service before moving in so that they and staff could determine if the service was suitable for their needs.
- Regular care reviews were conducted involving people, so their needs and choices were known, and personalised care and support provided.
- Guidance was in place for staff to follow to effectively deliver personalised care including providing people with the support that they needed to achieve their chosen goals and be as independent as possible.

Staff support: induction, training, skills and experience

- Staff received the induction, training and support they needed to deliver safe, effective care and meet people's individual needs. New staff shadowed experienced staff to learn about their role in supporting people effectively and safely. One support worker told us, "I am always learning every day."
- Staff received the provider's mandatory training. Additional training that met people's specific needs such as understanding behaviour that challenges was also provided. The provider monitored staff training and reminders were sent to staff when refresher training was due.
- Staff told us that they received the training they needed. They confirmed that the provider was responsive to requests for further training in topics relevant to their role and the needs of the service. One support worker told us that they had requested training about the medical condition diabetes and had now completed it. Most staff had relevant qualifications in health and social care.
- Staff told us that they felt they were well supported by managers, who they could contact at any time for advice and support. Staff received ongoing supervision. However, planned one to one supervision meetings which provided staff with opportunities to discuss issues to do with the service including learning and development did not always take place regularly. Following the inspection, the registered manager told us that staff supervision meetings were now being carried out on a regular basis. They also told us that they and the human resources manager would complete training in carrying out staff one to one formal supervision.

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

- People were able to make choices about their food and drink and menus were discussed with them. People were provided with the support that they needed to shop for groceries and be involved in food planning and preparation. Staff encouraged people to make healthy food choices.
- People had the opportunity to participate in cooking activities that helped them develop their cooking

skills and knowledge of nutrition.

- People with specific nutritional needs were provided with food supplements and a soft diet when needed. The registered manager spoke about a person who had been reluctant to eat and now ate three meals a day after they received support with their dietary needs.

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

- People were supported to access the healthcare services they required. People's care and support records included essential information including information about people's health needs including mental health needs and the assistance and support required from the service to meet those needs.

- Staff worked with healthcare and social care agencies to ensure people's needs were met. Records showed that people saw healthcare professionals and attended hospital appointments when needed. For example, staff attended appointments with a person because they did not always understand the information they received.

- One support worker spoke positively about encouraging and supporting people to exercise and lead healthier lives.

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

- The provider worked with landlords of the supported living premises to ensure the services were fit for purpose and safe. They also employed staff to attend to maintenance issues. The two services we visited were well maintained. The communal lounge in one of the services had a large television and some seating. The registered manager told us that they would involve people using the service in looking at ways to improve the attractiveness and comfort of the room.

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. The registered manager told us, and records showed that there was one person being deprived of their liberty regarding areas to do with property and affairs under an Order from the Court of Protection.

- People were supported to have as much choice and control over their lives as possible. They were encouraged to make choices, such as what they wanted to do, wear and eat. People could go out and about freely.

- Staff knew that it should be assumed people had the capacity to make decisions about their care and other aspects of their lives unless assessment showed otherwise. They knew healthcare and social care professionals and when applicable people's relatives, would be involved in making decisions to do with people's care and treatment in the person's best interest when needed.

- Staff told us they asked for people's agreement before providing them with support or assistance.

# 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; respecting equality and diversity

- People spoke positively about the service they received. We observed friendly and sensitive engagement between staff and people using the service. It was clear people knew staff well and were comfortable with them.
- Staff knew people well. They spoke about people's personalities and preferences, and of valuing people's differences such as cultural, language and spiritual needs.
- Information about people's histories, interests, cultural and relationship needs, and preferences was included in their support plans. We saw, for example that staff were working with a person to help them to engage more positively with people of the opposite gender. People's histories included information in relation to their mental health, and factors that may have led to trauma and distress in the past.
- People's support plans included detailed information about how to recognise and respond to changes in people's wellbeing.

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

- The service supported people to be as involved as possible in making decisions about their care. People participated in reviews of their care and support needs. On the day of the inspection several people had chosen to take part in a day trip. The registered manager told us that one person had hesitated a few times before finally deciding to go on the trip.
- People's support plans contained information about their communication needs. Staff were aware that people's sensory needs such as hearing needs could affect the way they communicated. The registered manager told us that they would always ensure that information was provided in a format that met people's individual needs. They provided us with an example of staff communicating effectively via text messages with a person who had hearing needs.

Respecting and promoting people's privacy, dignity and independence

- Staff had a good understanding about the importance of respecting people's privacy. One support worker told us, "I always ask people if I can come into their room."
- Staff received training about treating people with dignity and respect and knew the importance of respecting people's confidentiality and not speaking about people to anyone other than those involved in their care. People's care records were stored securely so only staff could access them.
- People had their own key to their rooms, and their independence was promoted and respected. Staff gave us examples where people had developed and learned new skills. These skills included money management and accessing public transport so that they were better prepared for living independently or with minimal support. One person told us that they had moved to their own flat and enjoyed living independently.

- People's support plans included guidance to promote and support their independence. Staff supported people to maintain the relationships with those who were important to them.

# 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 received personalised care that was responsive to their needs. People were involved in the assessment and support planning process. This focused on the person's needs including their goals and aspirations. For example, one person's goal was to manage stress more effectively. Guidance was in place to support them with achieving that.
- People's support plans were up to date and included guidance for staff about how support should be provided. For example, there was information about how staff needed to support a person who sometimes experienced anxiety and hallucinations at night. Another person's support plan included guidance for staff on motivating them to attend appointments and engage in self-care and other activities.
- Staff told us handovers and updates throughout the day gave them the opportunity to share information about people's current needs and of changes in their care and support plans, so people received effective care and support. The registered manager told us that they would provide people with a copy of their support plan if they wanted it.
- People were supported by staff to plan and take part in a range of activities of their choice. These activities were based around people's individual interests and in developing their skills. Activities included cooking, going to a gym, arts and crafts, completing household tasks and shopping for personal food items and toiletries. Regular day trips also took place. The registered manager told us that people also participated in Employability sessions to help equip them with the skills needed to obtain a job.

Improving care quality in response to complaints or concerns

- The service had a complaints procedure which informed people about what to do if they were unhappy or wanted to make a complaint. The registered manager took concerns and complaints about the service seriously with any issues recorded and acted upon.
- During tenant meetings, and one to one meetings with staff people had the opportunity to say if they were unhappy with any aspect of the service. The registered manager had an 'open-door' policy. Throughout the inspection people visited the office to speak with her and other management staff.
- Care staff knew that they needed to report any complaints and concerns about the service that were brought to their attention by people using the service, people's relatives and others involved in people's care.

End of life care and support

- The registered manager told us that the service did not provide end of life care but if in future they started to provide it, they would ensure that staff received the training and support that they needed. Records showed that some staff had received learning about the principles of end of life care.
- People's support plans included information about their end of life wishes. This included details about the family members people would want support from and any specific spiritual and cultural needs and wishes

they had.

# 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.

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

- There was a clear management structure in place to ensure regulatory requirements were understood and the service was managed effectively and safely.
- The registered manager and other staff knew their roles and responsibilities. Regular meetings ensured that staff were kept up to date with any changes in the service and had the opportunity to share good practice.
- Staff confirmed that the registered manager and other senior staff were very approachable and provided guidance and direction whenever they needed it. Throughout the inspection we observed that people and staff were comfortable approaching the registered manager, who spoke with them about a range of areas to do with the service.
- Support workers told us that they liked their jobs and spoke highly about the people that they supported. The registered manager also spoke of enjoying their job. They told us, "I love it, one of my best jobs ever. Every day is different."
- There were systems in place to monitor the quality of the service, and any risks to people's safety. These included medicines and environment safety checks and 'spot checks' of staff carrying out their duties. The service had a detailed business continuity plan which provided clear guidance for staff on managing events such as emergency evacuations, electrical and water failures, staff shortages due to pandemics.

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

- The service promoted person-centred care and support. People were fully involved in making decisions about the service they received, and their care and support plans reflected their needs and preferences.
- There was a clear organisational commitment to promote a positive, open culture. The registered manager knew the importance of being open and honest with relevant persons in relation to the services they provided, and of taking responsibility when things go wrong.

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

- People were provided with a handbook that included detailed information about the service provided.
- Staff engaged with people and involved them in the service that they received. People were listened to and had opportunities to feedback about the service. During a tenants' meeting people had provided positive feedback about the activities they had participated in.
- A survey of people's views of the service had taken place in January 2019 and showed that people were

positive about the service.

- The service understood the importance of respecting and valuing people's diversity needs and providing people with support in meeting those needs when required such as supporting people to attend places of worship if they wished to do so.
- The service was responsive to people's needs and were available to provide people with advice and support 24 hours a day. The registered manager provided us with examples of people using the service having contacted her during the day and occasionally at night when they wanted to speak with her.

Working in partnership with others. Continuous learning and improving care.

- The service worked in partnership with other agencies including local authorities, and teams of healthcare professionals.
- The service had liaised with specialist health professionals to ensure positive outcomes for people. For example, following medical advice that a person would benefit from living in a downstairs room with en-suite facilities, staff had supported the person to move to a house where this was available to them.
- The registered manager told us that they ensured that they kept up to date with legislation changes and guidance about best practice.
- The registered manager and directors demonstrated an open and positive approach to our feedback and spoke of plans to develop and continue to improve the service.