

Spectrum Group Services Limited

# Spectrum Group Services Limited

## Inspection report

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## Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service well-led?

Good ●

# Summary of findings

## Overall summary

Spectrum Group Services Limited is a domiciliary care service providing personal care to 37 people aged 18 and over at the time of the inspection.

Not everyone who used the service received personal care. The Care Quality Commission (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

The registered manager and senior team used clear auditing and governance systems to maintain a detailed oversight of the service, manage risks and make improvements.

People were protected from the risk of harm and abuse by knowledgeable, trained staff. Risks to people and within their environment were effectively assessed and documented using evidence-based tools. People's medicines were managed safely. There were safe numbers of suitable staff to provide care and support to people. People were protected from the spread of infection by trained staff. The registered manager and staff team continually reflected on practice to make improvements to people's care and support.

The registered manager and staff team were committed to delivering person-centred, compassionate care. Staff and the people they supported were involved in how the service was run and their feedback was sought regularly.

Staff demonstrated a culture of learning and continuous improvement and worked collaboratively with other professionals to meet people's needs. 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 supported this practice.

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

Rating at last inspection and update

The last rating for this service was requires improvement (published 27 October 2021) and there were two breaches of regulation. The provider completed an action plan after the last inspection to show what they would do and by when to improve. At this inspection we found improvements had been made and the provider was no longer in breach of regulations.

Why we inspected

We carried out an announced comprehensive inspection of this service on 11 August 2021. Breaches of legal requirements were found. The provider completed an action plan after the last inspection to show what they would do and by when, to comply with the regulations for safe care and treatment and good governance.

We undertook this focused inspection to check they had followed their action plan and to confirm they now met legal requirements. This report only covers our findings in relation to the Key Questions of safe and well led, which cover those requirements.

For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating. The overall rating for the service has changed from requires improvement to good. This is based on the findings at this inspection.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Spectrum group Services Limited on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

#### Follow up

We will continue to monitor information we receive about the service, which will help inform when we next inspect.

## 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 well-led?**

**Good** ●

The service was well-led.

Details are in our well-led findings below.

# Spectrum Group Services Limited

## **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

This inspection was carried out by one inspector and an Expert by Experience. An Expert by Experience is a person who has personal experience of using or caring for someone who uses this type of care service.

#### Service and service type

This service is a domiciliary care agency. It provides personal care to people living in their own homes.

#### Registered Manager

This service is required to have a registered manager. A registered manager is a person who has registered with the Care Quality Commission to manage the service. 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. At the time of our inspection there was a registered manager in post.

#### Notice of inspection

This inspection was announced. We gave the provider short notice of the inspection visit. This was because we needed to be sure that the provider or registered manager would be in the office to support the inspection. Inspection activity started on 16 January 2023 with our telephone survey of people who use the service and finished on 23 January 2023. We visited the office on 23 January 2023.

#### What we did before the inspection

We reviewed information we had received about the service since the last inspection, including notifications received from the provider. The law requires providers to send us notifications about certain events that happen during the running of a service. We sought feedback from the local authority and professionals who work with the service. We used the information the provider sent us in the provider information return (PIR). This is information providers are required to send us annually with key information about their service, what they do well, and improvements they plan to make.

During the inspection

We spoke with nine people who use the service and five relatives about their experience of the care provided. We also spoke with the registered manager, operations director and the nominated individual. The nominated individual is responsible for supervising the management of the service on behalf of the provider. We sought feedback from 21 staff. We received feedback from three staff. We sought feedback from 13 professionals and received feedback from two professionals. We reviewed a range of records. This included four people's care and support plans, four people's medicines administration records, three staff recruitment files and the staff training matrix. A variety of records relating to the management of the service including the policies and audits were also reviewed.

# Is the service safe?

## Our findings

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

At our last inspection we rated this key question requires improvement. At this inspection the rating has changed to good. This meant people were safe and protected from avoidable harm.

### Using medicines safely

At the last inspection medicines were not always managed safely. This was a breach of Regulation 12 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 12 .

- People's medicines were managed safely by trained, knowledgeable staff.
- The registered manager and senior team kept accurate and up to date records of any changes to people's prescribed medicines.
- People's medication administration record (MAR) contained all of the required information including names of GPs, dates of birth and allergies. MARs had been completed accurately and audits of MARs had been carried out by staff at regular intervals.
- The registered manager and senior team logged and reviewed all medicines errors and took appropriate actions to address errors such as providing refresher training to staff.
- Staff provided individualised support to help people take their medicines or to help them maintain independence in this area.

### Systems and processes to safeguard people from the risk of abuse

- People were protected from the risk of harm or abuse by suitably trained staff.
- The registered manager and staff team knew how to protect people and reported any safeguarding concerns to the local authority and to CQC appropriately in order to protect people.

### Assessing risk, safety monitoring and management

- Risks to people were effectively assessed and managed using evidence based tools.
- People's care and support documents contained clear and specific guidance for staff to help them manage risks for people to prevent them experiencing harm, whilst promoting their independence.
- Risk assessments were individualised and written in partnership with people and their legally appointed representatives where appropriate. They were regularly reviewed by staff.

### Staffing and recruitment

- People were supported by staff who had undergone a robust recruitment process.
- Staff files showed relevant pre-employment checks were completed as part of the recruitment process,

including proof of identity, evidence of conduct in previous employment, employment histories with explanations for gaps in employment, and a police check.

- The registered manager and senior team ensured there were enough staff to deliver safe and effective care and support to people.

#### Preventing and controlling infection

- People were protected from the risk of acquiring an infection.
- Staff were trained in infection prevention and control and used all the necessary personal protective equipment (PPE) when delivering care and support.

#### Learning lessons when things go wrong

- The registered manager and senior team maintained accurate, up to date records of incidents and accidents. These showed appropriate actions were taken by staff to mitigate risks to people and help prevent incidents happening again.



# 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.

At our last inspection we rated this key question requires improvement. At this inspection the rating has changed to good. This meant 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

At the last inspection the registered person had failed to establish and operate effectively systems and processes to monitor quality and safety in the service to ensure compliance with the fundamental standards. People's care and treatment records were not always complete and accurate. This was a breach of Regulation 17 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made and the registered person was no longer in breach of regulation 17.

- The registered manager and senior team used a comprehensive system of audits to enable them to identify and address any shortfalls in service delivery to ensure people received effective, safe care.
- Audits of different aspects of service delivery, were completed by staff at regular intervals. These were then reviewed by the registered manager and senior team.
- Where audits identified actions were required, these were assigned to a staff member and completed promptly.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people; engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- People who use the service and staff were regularly invited to feed back about the quality of care provided.
- People's relatives told us the registered manager resolved issues when they were raised. Comments included, "[Registered Manager] has been helpful in solving minor problems", and "It's well managed from what I've seen".
- The provider produced a regular newsletter to help people stay informed about developments in the service.
- The registered manager used team meetings as a way of sharing updates and communicating important messages to the staff team.
- Staff members told us they were happy working for the provider. Comments included, "I'm very happy working for Spectrum", "I am honoured to be part of this company as we do work that feeds the soul...I love what I do because it is valued in ways very few understand", and Spectrum Group services Limited is well managed with good and accessible managers who are interested in the well-being of their staff as well as

the clients they support".

- The provider was part of a government initiative to recruit skilled staff from overseas. They had provided considerable support to staff members to settle in the UK as new employees through supporting them to take part in English language courses, helping them find suitable accommodation and to learn to drive in the UK.

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

- The provider understood the duty of candour.
- Records showed they had upheld their legal duties in this area when something went wrong.

Continuous learning and improving care

- The registered manager and senior team continually reflected on practice to ensure people received effective care and improvements were made.
- Staff reported their observations and opinions were valued and actions were taken as a result of them sharing their feedback with the senior team.

Working in partnership with others

- The registered manager and senior team demonstrated they worked collaboratively with a number of health and social care professionals to meet people's changing needs.