

Real Care Solutions Ltd

Real Care Solutions

Inspection report

Altius House
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Letchworth Garden City
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SG6 1AQ

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Website: www.realcare.uk

Ratings

Overall rating for this service	Good ●
Is the service safe?	Good ●
Is the service effective?	Good ●
Is the service caring?	Outstanding ☆
Is the service responsive?	Good ●
Is the service well-led?	Good ●

Summary of findings

Overall summary

The inspection of the office location took place on 14 July 2017. On 17 and 26 July 2017 we contacted people and relatives for feedback about the service people received. This was the first inspection the service had since they registered with the care Quality Commission on 23 June 2016.

Real Care Solutions provides personal care and support to people living in their own homes. At the time of the inspection 11 people received support from the service however only nine people received the regulated activity of personal care. The other two people received practical support.

The service had a registered manager in post. A registered manager is a person who has registered with the Care Quality Commission (CQC) 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 and associated Regulations about how the service is run. In this instance the registered manager was also the provider.

People told us staff were very kind and caring towards them and offered support which met their needs and made them feel safe. Staff showed a caring attitude when talking about people and were able to tell us how they delivered individualised care which met people`s needs.

People and relatives told us that the service was extremely caring and often staff and the registered manager went over and above their contractual duties to ensure people received the most effective and personalised care. This had a positive impact on people by improving their quality of life.

People were supported to make decisions for themselves and encouraged to be as independent as possible. People and their representative were involved in planning the support people required. Staff understood how important it was for people to continue to live their life as they chose in their own home and they supported people effectively to achieve this for as long as possible.

Staff and the registered manager recognised people at risk of social isolation and they encouraged and organised the right support for people to access the community.

People were encouraged to retain or regain their independence by staff who recognised how important independence meant for people who often were living on their own. Staff told us they were well trained and mentored by the registered manager who supported them to understand how to provide care and support for people in a dignified way.

Staff told us they were proud to work for Real Care Solution because the care and support they provided to people was value based and did not compromise on the quality of the care people received.

People told us they knew the staff who offered them care and support. If on occasion staff were running a

few minutes late they always received a call to let them know when they would be arriving.

The registered manager established good working relationship with other health and social care professionals involved in people`s care. They often supported people to attend appointments and provided vital information to health professionals to ensure people received the best possible care and support which met their needs.

The registered manager used their skills and knowledge which they gained from previous nursing qualification to train staff to recognise early signs if people`s health declined. They always involved the right health care professionals in people`s care which often had a positive impact on people who received the right treatment and prevented their health from worsening.

Peoples` care plans were comprehensive and provided staff with detailed guidance on how to meet people`s needs in a safe and effective way. The registered manager visited every person who received care and support from the service at least once a week to give people an opportunity to give feedback on the service but also to monitor and assess people and ensure there were no changes in their condition.

The registered manager carried out regular audits in areas such as medicines, care planning and health and safety. In addition they regularly done unannounced spot checks when they checked staff`s competencies and the quality of the care provided to people.

The registered manager was a member of a reputable independent care provider association which conducted an independent survey involving people, relatives, staff and other stakeholders in giving feedback about the service they received.

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

Staff were trained and knew how to safeguard people from abuse and knew how to report concerns internally and externally.

Risks associated with the support people received were assessed effectively mitigated and regularly reviewed.

Recruitment processes were robust and there were sufficient staff with the right skills and experience to meet people`s needs at all times.

People had their medicines administered if needed by staff who were appropriately trained and had their competencies checked.

Is the service effective?

Good 

The service was effective.

People received personalised care and support from staff who were appropriately trained.

Staff felt supported, mentored and motivated by the registered manager to deliver effective care and support to people.

People were offered the support they needed to eat and drink.

Staff and the registered manager worked collaboratively with health and social care professionals to promote people's health and well-being and respond to any health concerns.

Is the service caring?

Outstanding 

The service was very caring.

The provider put people and what mattered to them at the heart of the service. People were in control of the support and care they received.

People developed positive relationships with the staff helped by

consistent staffing.

People were supported to retain and regain their independence and live in their own homes for as long it was possible.

People were treated with dignity and respect and their privacy was maintained.

The staff helped people who had complex health and social care needs to achieved positive outcomes and live independently.

Is the service responsive?

The service was responsive.

People received personalised care and support which was appropriate to their needs and preferences.

The service was very flexible and staff adapted the support they provided to constantly meet people`s changing needs.

People were aware of how to make a complaint. Complaints were investigated and outcomes were shared with staff for lessons to be learned and sustain the changes implemented to improve the service.

Staff and the registered manager recognised people who were at risk of social isolation and supported people to access the community.

Good ●

Is the service well-led?

The service was very well-led.

The manager had a clear vision about the service they provided and promoted an open and transparent culture with a strong emphasis on personalised care and support.

There were very robust and effective systems in place to monitor the quality of the support provided and to drive continual improvement.

The registered manager used their skills and knowledge from their previous nursing qualification to people`s benefit by involving health care professionals in people`s care in a timely way.

The registered manager ensured that people, relatives, staff and other stakeholders had regular opportunities to feedback on the

Good ●

service people received.

Real Care Solutions

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 was 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.

This inspection took place on 14 July 2017. The inspection was carried out by one inspector. We told the provider 48 hours before our visit that we would be coming to ensure we could access the information we needed.

Before the inspection, we asked the provider to complete a Provider Information Return (PIR). This is a form that requires them to give some key information about the service, what the service does well and improvements they plan to make. We also reviewed information we held about the service including statutory notifications. Statutory notifications include information about important events which the provider is required to send us.

Following the inspection of the office location on 14 July 2017 we contacted people and their relatives to ask for their feedback about the service. We did this on 26 July 2017. We talked to two people who used the service and three relatives. In addition we talked to two staff members, the office manager and the registered manager who was also the provider.

We looked at documents relating to three people and other documents and quality assurance systems the provider had in place to monitor the effectiveness of the services provided to people.

Is the service safe?

Our findings

People we spoke with and their relatives told us that they felt safe with the staff supporting them. One person said, "I do feel safe, they [staff] know what they are doing when they use the hoist I feel safe." The other person said, "I definitely feel safe. I have the same group of staff and they always turn up and they know what to do." One relative said, "Yes [my relative] is definitely safe and feels comfortable with the staff."

Staff were aware of their responsibilities in protecting people against the risk of avoidable harm and abuse. Staff told us that safeguarding people from all forms of abuse was an important part of their role. They said the regular safeguarding training and updates they received helped them be competent in understanding how to keep people safe.

Staff were knowledgeable about risks involved in supporting people in their own homes. Risk assessments were comprehensive and identified the risks to people's well-being and gave guidance for staff on how to mitigate these. For example staff had guidance in how to manage and mitigate risks in case people were at high risk of falls. Staff told us they looked at removing obstacles or any items from the person's way and reminded them to use their mobility aid. They also involved a physiotherapist in people's care if there was a need for it.

Staff were supported by the registered manager to positively manage risks for people which led to people being able to live in their own homes longer and stay safe. For example the registered manager told us about a person who asked them to allocate one staff member to carry out the visits they required and not two as initially assessed they needed. The person's home had been adapted to their needs including a ceiling tracking hoist. The registered manager visited the person and agreed that until the person feels safe with one staff they would allocate two; however one of the staff only helped if it was needed. As the person's confidence and abilities developed this was reviewed and reduced so and the person only required the assistance of one staff member. The registered manager put together a team of staff who visited the person on their own and met their needs safely. This meant that people were in control of their life and staff supported them respecting their wishes.

People and relatives told us that staff were reliable. One relative told us, "They are on time and if they are going to be late we get a phone call to let us know." Safe and effective recruitment practices were followed to make sure that all staff were of good character and suitable for the roles they performed. The registered manager told us they had a constant recruitment drive and only when they had the right numbers of staff were taking on more people. They told us they were looking for candidates with the right values and commitment and only those who showed integrity were considered suitable to work with people. The registered manager told us, "I always ask in interviews what integrity means and if they can answer I will consider their application. It is very important for them [candidates] to have this value because they are working in people's homes." All necessary pre-employment and identity checks were done before staff were offered employment. There were enough suitably experienced, skilled and qualified staff available to meet people's individual needs.

People told us staff supported them to take their medicines, and where people were able to take their own medication staff always reminded them. People's relatives told us they felt medicines were handled and managed safely by staff. Staff who administered medicines to people were trained and their competencies regularly checked by the registered manager who was a nurse. People and their relatives told us that they were grateful for the registered manager's help and support when checking people's medicines and involving the right professionals in people's care in case there was a need for it. For example a relative told us that the registered manager noticed that one of the tablets in a blistered pack their relative was taking had not corresponded with the pharmacy label. The registered manager talked to the pharmacy and this had been resolved to help keep the person safe.

Is the service effective?

Our findings

People who used the service and their relatives were very positive about the staff who provided care and support. One person told us, "I would recommend them [staff] to anyone. They are reliable and they all know what they are doing." One relative told us, "They [staff] have got the daily care for [person] down to a fine art and they have a laugh and they are kind in how they help them." Another relative said, "The level of care is excellent."

Staff told us they had all the training they needed to carry out their role effectively. One staff member said, "We are offered a lot of training and it is good. In addition [Name of the registered manager] is training us as well." Staff told us that the registered manager mentored them in the care and support they had to deliver to each person. For example if a person had a catheter the registered manager showed staff what they had to check and report in case this was not draining correctly and also how to safely care for people. A catheter is used to manage urinary incontinence.

The registered manager worked with a reputable care providers association and staff received training from accredited training providers. The registered manager regularly observed staff to ensure they were correctly implementing their learning in their work practices. One staff member said, "[Name of the registered manager] comes around when we are working just to check we are doing everything as we should. She is always helpful." Newly employed staff went through thorough induction training and worked alongside a more experienced staff member until they were confident in working alone.

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 were supported by staff to take informed decisions about their care and support.

People told us staff always asked for their consent before staff attempted to offer care and support. Relatives where appropriate said they were involved in people`s care and staff always checked with them and people before carrying out any support. One relative said, "My relative always says no to everything but they [staff] manage to persuade them to accept the support and they enjoy it."

There was a strong emphasis on the importance of eating and drinking well. Staff told us if people needed this support they always encouraged people to choose healthy options. One person told us, "The [staff member] prepares my food and it is good." Although there were very few people staff supported with eating and drinking they monitored people`s weights and involved GP`s or dieticians in peoples` care if there was a need for it.

Staff told us they had people`s health and wellbeing at heart at all times. The registered manager supported people with their appointments, liaised with their GP`s and district nurses team. We found several examples where the registered manager communicated with people`s GP, pharmacists, district

nurses team giving them valuable information about people. Following this the health care professionals were able to review people`s medicines and people`s conditions improved.

Is the service caring?

Our findings

People who used the service and their relatives told us that staff provided support in a kind, compassionate and caring way. People told us they liked staff coming in their homes and they developed long standing trusting relationships. One person told us, "They really are what they say they give real care." Another person said, "They [staff] build up a good rapport with you and they are caring." One relative said, "They [staff] are caring, excellent. Very good at involving [my relative] they laugh and joke. They are more like family now."

The service had a very strong, visible and person centred culture. This was reflected in discussions with the management, staff, people who used the service and relatives involved in the service and from records seen.

People told us they were involved in their care. One person said, "At the beginning the [registered] manager came and spent ages discussing with me what I needed help with. They check every so often if anything has changed and will always say `if you need any extra help just contact us`." One relative said, "[Registered manager] did a lot of groundwork before taking my [relative] on. She bothered to make visits and to find out as much as possible about my [relative]. She was quick to recognise that [relative] is prone to being anxious so she goes out of her way to ensure [relative] is not in a position to worry about things."

The care plans contained information about preferences for care support including the gender of care support workers and how people wished to be cared for. Care plans seen described how people communicated their needs. Daily communication records demonstrated a very kind and sensitive approach from the care staff in the care delivery and support. The registered manager told us that they prided themselves on the provision of `care without compromise` and that the care provision was wholly dependent on relationships built on trust and care.

We found that the registered manager acted as a role model for staff in creating a caring culture throughout the service by putting people first. People relied on their services and trusted to turn to the staff for any help they needed even outside the agreed care contract they signed, for example if people`s relatives were on holiday the registered manager answered to emergency calls if the person needed help in case of an emergency. Staff understood how much people wished to be cared for in their own homes and they went over and beyond their lines of duty to help people remain safe in their own homes. We found several examples where the registered manager and staff positively impacted on peoples` lives enabling them to remain in their own homes. For example a person`s relative told us how the person was discharged home from hospital very immobile. They needed a hoist and two staff to help them out of bed into a chair. The relative told us how staff and the registered manager with patience and dedication got the person to walk again. They said, "Little by little the care staff worked and encouraged them so that they built up confidence and got them mobile again. They [staff] were brilliant-my relative is now mobile and really quick."

People, relatives and staff praised the registered manager for how they used their past knowledge to effect a change for the people who used the service. A relative said, "My [relative] had some increased stiffness due to their condition and [name of registered manager] thought that exercise would help but wanted to be sure

the right ones were used. They asked for a physiotherapist and then they taught the carers how to do the exercises which they now do." We found that this had a positive effect on the person who was slowly regaining their mobility in their limbs. Another relative told us that the registered manager noticed that the medicines their relatives took were not labelled correctly by the pharmacy and they talked to the pharmacy to ensure the person was safe and the medicines were the correct ones. They said, "The [registered] manager is great as they have nurse training so will check medicines and once chased up the pharmacy for the wrong name for the tablets. Another time they felt [my relative`s] increased high blood pressure could be due to one of the medicines and followed up with the GP and the medicines were changed and their blood pressure resolved." We found that due to this the person`s mobility improved and they had no more complaints about dizziness.

This meant that people were safe and looked after holistically by a team of staff and the registered manager who had their best interest at heart and were able to provide care and support well beyond their lines of duty.

People and relatives valued that staff encouraged people to maintain their independence and their dignity. One relative said, "They [staff member] are really good at encouraging and supporting [my relative] to be motivated to get up and do things. They speak about their family and have a good rapport with [my relative] who can be a tricky character, quite low and negative but they encourage and support them. They suggested [my relative] went to a daycentre occasionally but they were not keen. Staff agreed with them and brought a person from the day centre to meet [my relative] to talk through what it would be like." At the time of the inspection we found that the person had a scheduled start date for the day centre. Another relative told us, "They [staff] do extra things that are not in the care plan, like blow dry my relatives hair. They now do it instead of me and they do it well my relative is happy."

People told us they felt respected by staff who maintained their dignity and privacy. One person said, "I always feel respected by the carers." Another person said, "They are good at keeping my dignity and covering me up. I feel comfortable with them." A relative said, "They [staff] are very respectful and help maintain my relatives dignity." Staff understood how to promote and respect people's privacy and dignity, and why this was important. Their responses to our questions demonstrated positive values, such as knocking on doors before entering, ensuring curtains were drawn, covering up people during personal care support and providing personal support in private. Staff told us how they gave people time to participate in their care themselves where possible, and when providing people with personal care encouraged people to carry out even small tasks that were important to them such as washing or combing their hair.

Relatives felt that the service was reliable and helped their mind feeling at ease when they were not close to people. One relative said, "[Registered manager`s name] certainly goes beyond their expected duties. If I am on holiday then they are happy for me to pass on her mobile number to 'Careline' and 'Meals on Wheels' so that they can respond to any problems arising. They have even organised a wheelchair taxi and taken my [relatives] to the doctors for her ears to be syringed whilst I was away. I have total confidence in anything that [registered manager] does for [relative]. [Registered manager] treats my [relative] as if she was part of their family. This in turn takes a huge weight off of my shoulders because I always have someone else to rely on." This meant that because people build trusting and meaningful relationships with staff relatives felt able to continue with their life whilst knowing that their loved ones were cared for and safe.

Is the service responsive?

Our findings

People told us the care and support they received was responsive to their needs, and they or their rightful representative were involved in regular reviews of their care needs. People who used the service told us the care they received was as they liked it. One person said, "They [staff] are very good, they know my likes and they work as I want them to." Another person said, "I never feel rushed they [staff] know how I like to be helped."

Two people who used the service spoke of how they requested not to have male carers and both were happy with how this was dealt with and they only had female carers. One person said, "I don't like male carers I just feel more comfortable with female carers and it wasn't a problem with the [registered] manager." A relative said, "They [staff] are very good on all levels both physically and in how they persuade them [person] in their mental attitude. They [staff] are brilliant."

People and their relatives told us how important it was for them that whatever they needed could always contact the office and somebody always answered and dealt with their problem. One person said, "I can always contact the office whatever I need and there is somebody to deal with the problem." A relative said, "We have an open two-way communication system, whereby [care staff] can contact me and vice versa should the need arise. In fact, this two way communication is something I really appreciate with Real Care Solutions. If I ever rang the previous care company I could never speak to anyone I wanted to and they never returned my call when they said they would. With Real Care Solutions there is always someone available in the office and any problem is immediately dealt with."

The registered manager and staff successfully supported people at risk of social isolation. The registered manager established good working relationships with health and social care professionals involved in people's care and ensured they kept the communication effective between all involved. This had a positive effect on people. For example a person who returned home from a stay in hospital could not leave their house as they required access for a wheelchair. The registered manager organised this and had a mobile ramp delivered which was used by staff to take the person out in their garden or for a walk in their wheelchair. They also often cleared the pathways around people's houses to ensure these were clear and safe for people to use.

The registered manager and staff encouraged people to be part of the community and often helped people to attend appointments, do their shopping and enabled staff to spend time with people.

People told us that they saw the registered manager at least once a week as they often stood in for staff and other times would just pass by to check all was well. They told us they had an opportunity to feedback on the service and they felt able to approach the manager if they had any concerns or complaints. One relative said they only had one complaint in the past and they spoke to the registered manager who took immediate action and the issue had been resolved.

We found that people and their relatives were extremely happy with the service they received from the staff

and the registered manager. They often wrote to the office to express their gratitude. For example one person wrote, "I appreciate all the help and support. Thank you so much."

Family members of a person whose wish was to move to a part of the country they loved was achieved with the help of the staff and the registered manager wrote, "Thank you so much for all you have done for our [relative], not just caring for them at home but also everything you did to get them to [place], it would not have happened without you. Heartfelt thanks." Another family member wrote, "You [staff] were incredible. I feel the most important aspect of what you did was to make us feel that you really cared, easy to say but much harder to do. We will always be immensely grateful."

This meant that the service was responsive to the care and support needs of people who wished to be cared for in their own homes and made everything possible for people and their family to achieve this.

Is the service well-led?

Our findings

People we talked to and their relatives were extremely satisfied with the service provided. They all praised the quality of care, the friendly, caring and happy personalities of the staff and their willingness to go the 'extra mile' to meet their needs. They praised the registered manager for how they were leading their staff team. One person said, "[The registered manager] leads well and is very hands on. They [staff] are excellent. I would definitely recommend them." Another person said, "I am very pleased they are very good." One relative said, "The [registered] manager goes out of their way to help and think of things for my relative." Another relative said, "Very well organised [the registered manager] is always respectful of [my relative] and staff. Has clear expectations for staff but then lets them get on with the job. I would say they are excellent." A third relative said, "Prior to 2016 my [relative] had a different care company with whom we were very unhappy. Real Care Solutions are like a breath of fresh air. The service as a whole is top notch. All of the carers are kind and caring. [Person] is comfortable with them all."

We spoke with the registered manager and staff team about the culture of the organisation and discussed the vision, values and ethos of the service. These focused on delivering quality services primarily by ensuring people were put first, and supporting staff continually but also that the care was person centred and individuals were central to the work they did. The registered manager told us, "We have our values which we will talk about with staff, however the most important one is that we don't compromise on the care people receive. It is very important for people to receive dignified care."

Staff we spoke with were clear on the values and the ethos promoted by the registered manager and they felt proud to work for an organisation who put people first. One staff member said, "I am so proud to work here. Our values are: compassion and care without compromise. I have never seen anyone working here compromising on the care given. We are not pressured to rush, we can take the time people need. This is why people are happy and content; they are considered people and individuals."

Staff told us that the day to day leadership in the service was of high quality and promoted an open culture and supportive environment. Staff told us they felt confident in raising any issues and felt assured that they would be dealt with effectively and sensitively. One staff member said, "We are treated very well. We have meetings every two weeks and we are listened to and problems are resolved."

The registered manager who was also the provider was clear about their vision regarding the purpose of the service, how it operated and the level of care provided. They told us they were gradually growing the numbers of people they supported and only if they had the available staff to maintain and provide a good quality service. They told us they were constantly recruiting and when staff were ready and trained to deliver the care people needed were accepting new referrals.

The service support manager based in the office showed us the service development plan. They were planning to purchase an electronic care planning system which would allow staff, people and relatives where appropriate to access records in real time what care people received. They told us they thought that time would be saved by staff using electronic devices to record what care people received and staff could

spend even more time socialising with people.

The registered manager contracted an independent organisation to conduct a survey which involved feedback from people, relatives, staff and other stakeholders. We saw that the results were overwhelmingly positive. People and relatives attributed 100 percent to how caring, effective and well-led the service was. One person`s feedback included, "My carer [staff] spends time with me to do my exercises."

Audits were carried out in areas such as medicines, infection control, care planning and health and safety. The registered manager told us that they carried out regular checks of people`s home environment to ensure people and staff were safe. They also carried out spot checks when they assessed staffs` competencies and talked to people about their care.

The service support manager monitored visits on a live computerised system Staff were required to log in and out of the system when they accessed people`s home and when they left. This was showing on the system in the office so any delay or staff not turning up was immediately identified. One staff member said, "We do log in and out. We also know that if for any reason we are anticipating that we will be more than ten minutes late we call the office and people to tell them. We have enough time allocated to travel from one person to another."

Services that provide health and social care to people are required to inform the CQC of important events that happen in the service. The registered manager had informed the CQC of significant events in a timely way. This meant we could check that appropriate action had been taken.