

Amazing Rainbow Healthcare LTD

Amazing Rainbow Healthcare Ltd

Inspection report

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Tel: 07475093389

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Ratings

Overall rating for this service

Requires Improvement 

Is the service safe?

Requires Improvement 

Is the service effective?

Good 

Is the service caring?

Good 

Is the service responsive?

Good 

Is the service well-led?

Requires Improvement 

Summary of findings

Overall summary

About the service:

Amazing Rainbow Healthcare is a domiciliary care agency. This service provides care and support to people with a physical disability and people living with dementia. They can provide companionship and assistance with household tasks, everyday activities, hobbies, outdoor pursuits and personal care. There were six people being supported with personal care at the time of our inspection.

People's experience of using this service: The service had been inconsistent in the quality of the care and support they provided.

Medicines were not always managed safely. People did not always get creams as prescribed and there was a lack of instructions to ensure medication was administered safely.

Auditing systems had failed to identify some areas of concerns found at inspection, such as unsafe medication practice and inconsistent information in care plans. We made a recommendation regarding the quality assurance systems in place.

People told us they felt safe, staff had knowledge of safeguarding procedures.

Staff had received appropriate induction, training and support to enable them to carry out their role.

People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible.

People and their relatives were consistently positive about the care they received and told us staff were kind and caring.

People were supported to access health care services when required.

People and staff told us the management team were approachable and listened to them when they had any concerns. People and staff were involved and engaged with the running of the service.

Rating at last inspection:

The service registered with CQC in December 2017. This is the first inspection of the service since it registered.

Why we inspected: This was a planned inspection based on it being a 'new' service

Enforcement:

We identified one breach of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014

around safe care and treatment and good governance. Action we told provider to take, refer to end of full report.

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

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 not always safe.

Details are in our Safe findings below.

Requires Improvement ●

Is the service effective?

The service was Effective.

Details are in our Effective findings below.

Good ●

Is the service caring?

The service was Caring.

Details are in our Caring findings below.

Good ●

Is the service responsive?

The service was responsive.

Details are in our Responsive findings below.

Good ●

Is the service well-led?

The service was not always well-led.

Details are in our Well-Led findings below.

Requires Improvement ●

Amazing Rainbow Healthcare 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 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:

Amazing Rainbow Healthcare is a domiciliary care agency. It provides personal care to people living in their own homes.

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

Inspection site visit activity started and ended on 14 March 2019. We visited the office location to see the registered manager and office staff; and to review care records and policies and procedures.

What we did:

Before the inspection we reviewed information available to us about this service. This included details about incidents the provider must notify us about, such as abuse; and we sought feedback from the local

authority. The provider sent us a provider information return prior to the inspection. This is information we require providers to give some key information about the service, what the service does well and improvements they plan to make. We took this into account when we inspected the service and made the judgements in this report.

During the inspection;

- We spoke with the registered manager and provider,
- Spoke with three care staff,
- Spoke with five relatives and one person receiving care from the service.
- Made a home visit to one person after obtaining their consent for this.
- Reviewed three people's care records including medication administration records.
- Reviewed records of accidents, incidents, complaints and compliments.
- Checked training and personnel records.
- Reviewed audits and quality assurance reports.

Is the service safe?

Our findings

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

Some aspects of the service were not always safe and there was limited assurance about safety. There was an increased risk that people could be harmed. Regulations may or may not have been met.

Using medicines safely

- Medication was not managed safely.
- Protocols were not in place for when people required 'as required' medication.
- The prescribers Instructions were not on MARs so staff did not have the required information to ensure medication was administered safely.
- People were not always having creams applied as prescribed. For example, one person was having cream applied three times per day, however, was only prescribed twice per day.
- Body maps were not in place to advise staff were to apply topical creams.

The lack of robust management of medicines meant people were at risk of harm. This was a breach of Regulation 12 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 – safe care and treatment.

Assessing risk, safety monitoring and management

- Risk assessments were in place to reduce the risk to people. We found one person who was at risk of choking did not have a risk assessment in place. The registered manager completed this at the time of inspection.
- One person's care plan contained inconsistent and conflicting information. Staff we spoke with knew people well and were able to tell us how they provided safe care. The registered manager updated the care plan during the inspection.
- Environmental risk assessments were in place and robust.

Systems and processes to safeguard people from the risk of abuse; Learning lessons when things go wrong

- Policies in relation to safeguarding and whistleblowing reflected local procedures and relevant contact information.
- Staff demonstrated a good awareness of safeguarding procedures; they knew who to inform if they witnessed or had an allegation of abuse reported to them.
- We could see lessons had been learnt following accident and incidents that had been reported, however, not all accidents had been recorded appropriately.

Staffing and recruitment

- There was adequate staff to meet people's needs. People's visits were attended on time.
- People told us they received support from consistent staff. One relative told us, "[Name] gets anxious

when meeting new people so it was really important to ensure they get the same regular carers. It's working really well for us."

- Safer recruitment practices were followed to ensure people were supported by appropriate staff.

Preventing and controlling infection

- Staff had knowledge of infection control procedures and personal protective equipment was used appropriately.
- Environmental risk assessments included information on how to reduce the risk of spread of infection.

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 were positive about the care and support they received.
- Assessments of people's needs were completed and used to inform plans of care.
- Care plans contained information on how best to meet people's needs in line with their preferences.

Staff support: induction, training, skills and experience

- Staff received induction and training to give them the knowledge and skills to support people.
- People and their relatives felt staff were well trained. One relative told us, "The management, train each member of staff in what needs doing and they don't leave the house until they know the carers can do everything without any help. Then registered manager will pop in sometimes just to check they're still doing things the right way."
- Staff received supervision and told us they felt supported.

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

- Where staff needed to support people with their meals this was carried out in a way which ensured the person used their skills as much as possible to maintain independence.
- People told us they were happy with the support they received regarding their nutrition and fluids. One person told us, "I don't have a good appetite, but the carers ask me what I fancy and then they don't over-face me. They encourage me to try and eat what I can and then they remind me before they go what snacks they've left."

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

- People were supported to receiving health care services as required such as, district nurses and GP.
- Staff understood people's health need. Effective communication systems were in place with relatives and professionals to ensure people received timely care.

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. Applications must be made to the Court of Protection when people live in their own homes. None were required for the people supported by the service when we inspected

- Where people had the legal authority to make decisions on people's behalf this was recorded.
- Staff had knowledge of the mental capacity act and gained consent before providing support.

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 were supported by kind and caring staff. One person told us, "The carers go out of their way to help me. They're all lovely."
- Staff knew people well and treated people with respect.
- People and staff had developed positive working relationships. One relative told us, "[Name] loves their carer to death! They've matched them well. It's so important because of [Name's] complex needs."
- Staff treated people on an equal basis and we saw equality and diversity information such as gender, race, religion, nationality and sexual orientation were recorded in the care files. We did note, in one person's file this could be explored further. The registered manager assured us this would be done.

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

- Staff supported people to make decisions about their care, and knew when people wanted help and support from their relatives.
- People and their relatives were involved in their care plans. People and their relatives were involved in reviews and were encouraged to express their views.
- The registered manager had given people details if they required advocacy services, if people required support to express their views and make decisions.

Respecting and promoting people's privacy, dignity and independence

- People were treated with compassion, dignity and respect. Staff addressed them by their preferred name, and were polite and respectful.
- People said staff were supportive in helping them to remain as independent as possible. They were offered choice and control in their day to day lives. One relative told us, "Staff do everything we want them to do and more importantly they don't do things we don't want them to do. We don't want them to take over [names] life, so they just watch him do some things like cooking, so he's safe."

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

- Staff were knowledgeable about the people who used the service and displayed a good understanding of their preferences and interests, as well as their health and support needs, which enabled them to provide personalised care. One relative told us, "The carers know just what she likes, even down to the brand of shower gel, they do know [name] really well and what they like."
- Care plans contained person-centred detail of how people wanted to receive care and support.
- People and their representatives were involved in the development and review of care plans. One relative told us, "I was fully involved in the care plan, in fact I was able to lead it because I know all [Name] complex needs."
- People's communication needs were recorded in their care plan but had not always been fully explored. The registered manager was aware of accessible information standard and was looking at ways of developing this in the service.

Improving care quality in response to complaints or concerns

- All people were given a copy of the complaints procedure upon starting with the service.
- Complaints and concerns had been investigated and responded to in line with policy and procedures.
- People and their relatives told us they felt confident to complain. Comments included, "We can sort any little niggles with the registered manager, as soon as we pick up the phone. She listens and she sorts everything instantly", and, "The communication with the manager is really good I know I can raise anything any time verbally, so there's no need to write anything down. And of course, I know she'll do something about anything I raise."

End of life care and support

- The service was not supporting anybody at end of life. The registered manager told us they would implement end of life care plans if required and work with the appropriate professionals.
- People's wishes at end of life had not been explored. The registered manager assured us she would be implementing this in the assessment process.

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

Service management and leadership was inconsistent. Leaders and the culture they created did not always support the delivery of high-quality, person-centred care.

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

- Regular auditing was taking place; however, the audits had failed to identify some areas of concern found at this inspection such as, unsafe medication practices and accident and incidents not always been recorded appropriately and inconsistencies in care plans.
- Monthly charts were completed to monitor the number of certain areas, such as missed or late calls and falls. However, it was not always evident if this had been explored further.

Monitoring systems were ineffective in monitoring and improving the quality of the service. This was a breach of Regulation 17 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014, Good governance.

- People and their relatives were consistently positive about the registered manager. Comments included, "The registered manager is very professional and very competent. She runs a good service" and "The registered manager is fantastic and really caring. We're so lucky to have her."
- The service had a welcoming and family orientated approach to care. Staff morale was high and the atmosphere in the office and out in the community was warm, happy and supportive.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Working in partnership with others

- Reviews were taking place with people to give them opportunity to give feedback on the care they received.
- Staff meetings took place so staff were involved in the running of the service.
- Staff were supported by the registered manager and the provider. One staff member told us, "The provider and manager are excellent, they are very approachable easy to talk to happy to sort out any problems."
- The provider and registered manager demonstrated a commitment to provide person-centred, high-quality care by engaging with everyone using the service, relatives and health care professionals. One relative told us, "I speak with the registered manager most days, keeping up and passing on information we're never in the dark."
- The service had good links with the local community and worked in partnership with other agencies to improve people's opportunities and wellbeing.

Continuous learning and improving care

- The provider and registered manager demonstrated an open and positive approach to learning and development.
- The registered manager kept up to date with best practice by subscribing to online journals and attending updating their training regularly.

This section is primarily information for the provider

Action we have told the provider to take

The table below shows where regulations were not being met and we have asked the provider to send us a report that says what action they are going to take. We will check that this action is taken by the provider.

Regulated activity	Regulation
Personal care	Regulation 12 HSCA RA Regulations 2014 Safe care and treatment Medication was not managed safely.
Regulated activity	Regulation
Personal care	Regulation 17 HSCA RA Regulations 2014 Good governance Governance and monitoring processes were ineffective in monitoring and improving quality and safety of the service.