

Ryedale Community Care

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Inspection report

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Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

Rydale Community Care is a domiciliary care service providing regulated activity of personal care to people in their own homes. The service provides support to older people, people with dementia, physical disability and sensory impairment. At the time of our inspection there were 18 people using the service.

Not everyone who used the service received personal care. 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

People told us they were very happy with the service provided and felt safe with the staff who supported them. Staff had received training to protect people from avoidable harm and abuse and understood how to raise any concerns for further investigation.

Staff received appropriate induction, training, and support as necessary to enable them to carry out the duties they were employed to perform.

The registered manager completed a range of audits and checks to maintain standards of service. Management oversight was used in conjunction with feedback to ensure checks remained effective; to ensure actions identified as requiring improvement were always implemented in a timely way following the provider policy.

Risks associated with people's care were assessed and recorded to help staff provide safe care. Care plans included environmental risk assessments with information used by staff to keep them safe when entering and navigating people's homes. Where people required support to take their medicines, this was done safely as prescribed with appropriate record keeping checked for accuracy.

People were involved in, and central to planning their care and support. Care was delivered following a robust assessment of needs to ensure people's wishes, preferences and any personal characteristics were recorded and supported.

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.

Staff had good access to personal protective equipment to manage the risks associated with the spread of infection including COVID-19 and adhered to government guidance to protect people.

People spoke positively about the service they received and the way the service was managed. They told us they knew when to expect visits from care staff and that visits respected their preferred times and duration.

The registered manager was passionate about providing people with a personalised service to help them remain living as independent as possible in their own homes. People told us that their care was reviewed, and records updated when their care needs changed to ensure staff had the required information to support them in retaining their independence.

The culture of the service was open and empowered individuals to express their views to live their best lives with the support of staff. People told us they felt confident to approach staff and the registered manager and that their suggestions would be listened and responded to.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk

Rating at last inspection and update

The last rating for this service was requires improvement (published 17 December 2021) and there was a breach 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.

At our last inspection we recommended that the provider reviewed and developed the quality assurance system in line with best practice, to ensure it was effective in driving continuous improvement. At this inspection we found the provider had acted on our recommendations and they had made improvements.

Why we inspected

We carried out an announced comprehensive inspection of this service on 19, and 25 October 2021. A breach of legal requirements was found. The provider completed an action plan after the last inspection to show what they would do and by when to improve Regulation 19; Fit and proper persons employed.

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 Safe and Well-led which contain 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 Rydale Community Care on our website at 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.

Rydale Community Care

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 Health and Social Care Act 2008.

Inspection team

This inspection was carried out by an 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 provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations.

At the time of our inspection there was a registered manager in post.

Notice of inspection

We gave the service 48 hours' notice of the inspection. This was because it is a small service and we needed to be sure that the provider or registered manager would be in the office to support the inspection.

What we did before the inspection

We reviewed information we had received about the service since first registration. We sought feedback from the local authority and Healthwatch. Healthwatch is an independent consumer champion that gathers and represents the views of the public about health and social care services in England.

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.

We used all this information to plan our inspection.

During the inspection

We spoke with 3 people receiving a service and 2 relatives. We spoke with the registered manager and 2 staff members. We reviewed two care plans, medication records and two staff files. We looked at records associated with the management and compliance of the service which included quality checks and audits, staff induction, training records and information used to schedule staff support.

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.

Staffing and recruitment

At our last inspection the provider had failed to ensure required pre-employment checks were always recorded to robustly assess the risks relating to the health safety and welfare of people. This was a breach of Regulation 19 (Fit and proper persons employed) 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 19.

- Appropriate checks were completed to ensure staff were suitable for the role which included checks with the Disclosure and Barring Service (DBS). DBS checks provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.
- Staff files included information to reflect required evidence of pre-employment checks completed in line with the recruitment policy.
- Contingency plans were available to ensure there was always enough suitably trained and skilled staff at the service to safely meet people's individual needs. One person said, "I have 4 calls a day and they are at the time that suits me. As far as I remember they [staff] have never ever been late at all."

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

- People told us they felt safe with the care and support they received and were protected from the risks of abuse.
- Staff had access to a safeguarding policy and following training, understood how to recognise signs of abuse and what actions to take to safeguard people from avoidable harm.
- All incidents were documented with associated processes in place to record outcomes and any actions to help prevent similar events as part of lessons learnt.

Assessing risk, safety monitoring and management

- Care plans included initial assessments of people's needs. Known risks were recorded with information for staff to follow to provide safe care. One person said, "I fill a form in once a month with the carer about my care and I see the manager as she comes as one of my carers sometimes."
- Staff told us they knew how to manage risks when visiting people in their home. One staff member said, "We are only a small team and we work well together. We have good communication which means records are quickly updated so we are aware of any new risks including changes in people's needs."
- Checks were completed to ensure staff had the required information to safely access people's homes and

navigate their environments.

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 MCA 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 when this is in their best interests and legally authorised under the Mental Capacity Act (MCA). When people receive care and treatment in their own homes an application must be made to the Court of Protection for them to authorise people to be deprived of their liberty.

- We found the service was working within the principles of the MCA and if needed, appropriate legal authorisations were in place to deprive a person of their liberty.

Using medicines safely

- Where people required support to take their medicines people told us this was completed safely.
- If people were prescribed 'when required' (PRN) medicines, the registered manager followed a medicines policy to ensure protocols were in place for staff to ensure manufacturer's instructions were safely followed.
- Medication administration records (MAR) were completed where people required support. MAR were checked for accuracy and staff understood the importance of comprehensively maintaining these records.
- Staff had completed medicines training and recorded spot checks ensured they followed best practice.

Preventing and controlling infection

- We were assured that the provider was using personal protective equipment (PPE) effectively and safely. Staff had good access to PPE and understood the latest requirements.
- We were assured that the provider's infection prevention and control policy was up to date.

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; Continuous learning and improving care

At our last inspection we recommended the provider reviewed and developed the quality assurance system in line with best practice, to ensure it is effective in driving continuous improvement. At this inspection we found the provided had responded to our recommendations and improvements had been made.

- Governance and performance checks were used to manage the service, and these were reviewed to ensure they remained effective in maintaining, and where required improving the service.
- Where service risk, for example incidents and accidents were identified, supporting information was in place with actions to mitigate further similar events.
- The registered manager was aware of their responsibility to notify the relevant authorities including the CQC of important events that happen in the service. For example, any safeguarding concerns, service changes and serious incidents.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

- People were complimentary about the service. A relative said, "This company is the only one we have used, and I can't fault anything with it. The carers are so friendly, respectful, and when I hear them talking to [name] it is with a real caring attitude."
- Staff told us the registered manager was both approachable and responsive. One staff said, "I really enjoy my job; the manager is always available and extremely supportive when we need them."

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

- Processes were in place to ensure any incidents, concerns and complaints were investigated and responded to.
- People and staff were confident they would be supported with any enquires and that along with any required actions, they would be included in feedback to help improve the service and reduce further similar events.

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

- People were given the opportunity to feed back on the service they received and told us staff and the registered manager were approachable. One relative said, "I have regular emails from the manager. If she has any concerns she rings me."
- Staff discussed their passion for their roles and the supportive team approach to providing people with consistent care.
- Pre-assessments of people's need ensured care was planned to meet any personal characteristics and preferences.
- People's views and preferences were recorded and where required adjustments made to ensure care was tailored to meet their needs. For example, people were asked if they preferred male or female care staff before commencing a service to ensure their choices were available to support them.

Continuous learning and improving care; Working in partnership with others

- People told us they felt confident that the service would act if they suggested an area for improving care.
- The registered manager ensured people had access to other available health services to meet their needs and help them remain independent in their own homes. For example, staff discussed arrangements for additional support from external health professionals where people's weight loss became a concern.
- The registered manager worked with local authorities and only accepted referrals where they had the capacity to meet people's assessed needs.
- The registered manager and staff team were passionate about supporting people to live their best lives whilst remaining as independent as possible in their own homes.