

Restcare Limited

# Restcare Limited

## Inspection report

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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

Restcare Limited is a domiciliary care agency providing personal care and support to people in their own homes. This is help with tasks related to personal hygiene and eating. Where they do we also consider any wider social care provided. The service provides support to older people and younger adults. At the time of our inspection there were 4 people using the service.

### People's experience of using this service and what we found

People told us they felt safe receiving care from Restcare Limited. People's safety had been maximised with the systems that were in place. Staff understood their responsibilities to identify and report any concerns. Staff were safely recruited and checks were carried out to make sure staff were suitable to work with people who needed care and support.

Medicines were managed safely and administered by trained staff. Medicine audits were able to highlight any errors so appropriate action could then be taken to reduce a reoccurrence. Checks were undertaken to ensure staff continued to be competent administering medicines.

Staff received the training they required to meet people's needs. There were sufficient staff with the right skills and training to safely and effectively meet the needs of the people the service supported. Staff spoke positively about the support they received from the manager and told us they felt listened to.

People told us staff were kind and caring and treated people in a respectful manner. People's care plans were personalised to reflect people's personal preferences and choices. Staff knew people well and had knowledge about people's histories, likes and dislikes. People's equality, diversity and human rights were promoted and respected.

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.

Systems were in place to monitor the quality of the service people received. The registered manager was committed to providing a high-quality service to people with a strive to continuous improvement.

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

This service was registered with us on 24 November 2021 and this is the first inspection.

### Why we inspected

This was a planned inspection because the service had not been inspected or rated.

### 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?

The service was safe.

Details are in our safe findings below.

Good 

### 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 well-led.

Details are in our well-led findings below.

Good 

# Restcare 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 Health and Social Care Act 2008.

#### Inspection team

The service was inspected by 1 inspector

#### Service and service type

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

#### 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

This inspection was announced. 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.

Inspection activity started on 26 February 2023 and ended on 24 March 2023. We visited the location's office on 28 February 2023.

#### What we did before the inspection

We reviewed information we had received about the service and sought feedback from the local authority. 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 reviewed a range of records. This included 2 people's care records and medication records. We looked at 2 staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including policies and procedures were reviewed. We spoke to 1 staff member and the registered manager.

#### Following the inspection

We spoke to 1 person and 1 relative. We continued to seek clarification from the provider to validate evidence found. We looked at training and quality assurance records.

# Is the service safe?

## Our findings

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

This is the first inspection of this newly registered service. This key question has been rated good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People we spoke with told us they felt safe using the service. One relative told us, "I always feel [Name] is safe with all the care staff."
- People were supported by staff who knew how to raise safeguarding concerns. One member of staff told us, "If I was concerned, I would make sure the service user was safe and contact my manger. I would report to the local authority or CQC if I needed to."
- There were policies and systems in place to keep people safe. The provider understood their legal responsibilities to protect people and share important information with the local authority and the CQC.

Assessing risk, safety monitoring and management

- People had risk assessments in place that met their care requirements and included areas such as their mobility, environment, nutrition or medicine management. These provided staff with clear guidance to help reduce the likelihood of people being harmed.
- Care plans contained detailed information which ensured staff understood the needs of the people they supported.
- People's care plans and risk assessments were regularly reviewed and updated. This was done on a rolling schedule, or sooner if a person's care needs had changed.

Staffing and recruitment

- The service had enough trained staff to ensure people were safe. People were informed when staff needed to be changed at short notice, so they knew who would provide their care and support.
- Suitable arrangements were in place to ensure appropriate checks were undertaken when recruiting staff. The registered manager told us they continued to recruit to increase staff capacity to ensure they can continue to meet peoples care needs as the service expands.
- Staff were subject to Disclosure and Barring checks (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.

Using medicines safely

- People received their medicine as prescribed. Clear information was documented in the care plan to ensure safe use of medicines.
- Staff had received training in safe medicine management and were assessed as competent before administering medication. Spot checks of staff competencies were regularly carried out to ensure continued safe administration and support of medicines.

- The provider had a medicine policy in place which guided staff on how to administer medicines safely.

#### Preventing and controlling infection

- All staff had received training in infection control practices. Personal protective equipment [PPE] such as gloves and aprons were readily available in the office for when assisting people with personal care.
- The provider's infection prevention and control policy incorporated regularly updated processes to reflect changes in government guidance.

#### Learning lessons when things go wrong

- Staff understood their responsibilities to raise concerns and report incidents and near misses when something goes wrong.
- The registered manager ensured the management team and care staff reflected on where things could have been improved and used this as a learning opportunity to improve the service for people and staff.

# 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.

This is the first inspection for this newly registered service. This key question has been rated good. This meant 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;  
Supporting people to eat and drink enough to maintain a balanced diet

- People and their relatives were involved in the assessment process. People's needs were assessed prior to receiving a service to ensure staff could meet those needs.
- People's care plans and risk assessments were kept under review and updated whenever there had been a change in need. This ensured staff had access to the most current and relevant information needed to be able to provide care and support.
- People's assessments included characteristics covered by the Equalities Act (2010) such as religion and sexuality; these were respected by staff.
- Not all people receiving care and support required meals to be prepared and served by the staff as their relatives completed this. However, there were records of drinks and snacks being offered by care staff in between these times.

Staff support: induction, training, skills and experience

- People and relatives told us staff had the right skills to meet their needs. One relative told us, "The staff are very good with [Name]. They encourage [Name] to get up, wash and walk to the chair."
- Staff told us, and records confirmed, staff completed an induction into the service which included, meeting people, reading care plans, policies and procedures and working alongside experienced staff observing practice.
- Appropriate training was undertaken by staff to enable them to deliver care safely and effectively. The Care Certificate is an agreed set of standards that define the knowledge, skills and behaviours expected of specific job roles in the health and social care sectors. It is made up of the 15 minimum standards that should form part of a robust induction programme]

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

- Care plans showed that healthcare formed part of their initial assessments, which were taken into consideration before support started. Where professionals made recommendations around healthcare, these were implemented in people's care plans.
- The service worked well with health professionals such as GP's, district nurses, pharmacists and other agencies where required, to ensure continuity of care. Staff were in regular contact with the appropriate professionals to ensure continued effective support.

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 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 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 checked whether the service was working within the principles of the MCA

- At the time of the inspection, no one was being deprived of their liberty.
- People's care plans highlighted the importance of respecting people's right to make their own decisions. For example, 1 person's care plan stated, "Care worker to prompt giving medication and administer at [Names] direction, after obtaining consent."
- People's rights were protected by staff who had been trained and understood the importance of ensuring people made their own choices about their lives. Daily care notes completed by staff had records of consent being sought prior to supporting people.

# 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.

This is the first inspection for this newly registered service. This key question has been rated good. This meant 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 told us staff always treated them with kindness. A relative commented, "While they are getting [Name] ready, they chat to [Name] in a very friendly manner and encourage [Name] to talk about what they are going to do that day."
- People's well-being was assessed and any needs were highlighted. This allowed staff to support people emotionally, as individuals. For example, 1 person loved one had recently moved home. The care plan reflected a risk of isolation and requested staff assess and reassure [Name] at all call visits.
- Staff had received training in equality and diversity. There were policies and procedures in place to help ensure people were not discriminated against in relation to any of the protected characteristic such as race, religion or belief.

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

- People told us they participated in their care assessments. Records showed staff reviewed people's care needs on an on-going basis with people and their loved ones.
- Care records showed that people were involved in decisions about their care and that decisions were respected. In one example, a person told the registered manager they only wished to be supported with their personal care needs by female staff. This preference was respected and only female staff were assigned for this support.

Respecting and promoting people's privacy, dignity and independence

- Care plans included what people could do for themselves and where they needed support and highlighted the importance of promoting people's independence. One person's daily care notes stated, "We walked together to get things out for tomorrow's breakfast. We chatted whilst I washed up and [Name] laid the table."
- People were treated with dignity and respect. When staff spoke with us about people, they were respectful and displayed genuine affection. Language throughout care plans was respectful.
- The provider's policy and procedures on confidentiality were available to people, relatives and staff. Care plans and other personal records were stored securely. Staff knew how to maintain confidentiality.

# Is the service responsive?

## Our findings

Responsive – this means we looked for evidence that the service met people's needs.

This is the first inspection for this newly registered service. This key question has been rated good. This meant people's needs were met through good organisation and delivery.

Planning personalised care to ensure people have choice and control and to meet their needs and preferences; End of life care and support

- People received support which was based around their needs, choices and preferences. Each person had their own individualised care plan which detailed the support they needed and how staff were to provide that support. The plans were written in a detailed and personalised way.
- The registered manager ensured people's needs and any changes were communicated effectively amongst the staff. Information was shared between staff through secure mobile apps. This ensured important information was acted upon where necessary and recorded to monitor people's progress.
- At the time of the inspection the service was not supporting anyone with end-of-life care. However, there were systems in place to record people's advanced wishes, this included whether people wished to be resuscitated in the event of a cardiac arrest.

Meeting people's communication needs

Since 2016 all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard. The Accessible Information Standard tells organisations what they have to do to help ensure people with a disability or sensory loss, and in some circumstances, their carers, get information in a way they can understand it. It also says that people should get the support they need in relation to communication.

- Although people supported by the service were not publicly funded the service were meeting the standards of the AIS
- Care plans had communication records in place to guide staff how best to communicate with people. This included whether people required their glasses for reading or whether they needed their hearing aids in.

Improving care quality in response to complaints or concerns

- People had been given a variety of information when starting with the service. This included details on how to make a complaint and signposted people to other organisations if they were not happy with the service response. However, there had not been any formal complaints raised prior to the inspection.
- Staff were confident any concern or complaint raised in relation to care provided, would be dealt with appropriately. Comments included, "[Registered manager] is very open with us and I am sure [registered manager] would try to resolve it very quickly and make sure everyone is happy with the outcome."
- The registered manager told us, "I deal with any queries or concerns long before a formal complaint is needed. The families just come to me and we deal with it together."

# 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.

This is the first inspection for this newly registered service. This key question has been rated good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

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

- The registered manager was friendly, approachable and focused on providing good quality person centred care. People were included in the planning of their care and were achieving positive outcomes. One person told us, "[Registered manager] has spoken to us about our care plan. They just check we are getting everything that we need, we are very happy with Restcare Limited."
- There was a positive culture within the staff team and staff spoke passionately about their work. Staff were complimentary about the registered manager and how they were supported to carry out their work.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; 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 registered manager maintained good oversight of the service. A range of audits were in place to monitor the quality of the service and drive improvement.
- The provider understood the requirements of notifying CQC of significant events which had happened in the service. We reviewed evidence of notifications which confirmed all events had been reported to the CQC appropriately
- The registered manager demonstrated a good understanding of their responsibility to be open and transparent when things went wrong. People and their relatives told us they would not hesitate to go to the registered manager with a concern and were confident it would be addressed appropriately.

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

- People were regularly asked for feedback on the service performance during care plan reviews. Records showed people and relatives feedback was complimentary.
- Team meetings were held regularly and staff were encouraged to make suggestions for any changes that could be made to improve the quality of support the service provided. One staff member told us, "We can share all the time. [Registered manager] will always discuss with the team any concerns or issues and how to make our work life easier."
- The registered manager had a clear vision which demonstrated an understanding for people to achieve positive outcomes, by recognising areas to improve staff wellbeing. One staff member told us, "[Registered manager] is very helpful and nothing is too much trouble. They treat us like a family."

Continuous learning and improving care; Working in partnership with others

- The registered manager used a range of resources to ensure the service kept up to date with best practice.
- The effectiveness of the auditing systems in place were being continuously evaluated. The introduction of a new electronic call monitoring system provided additional oversight regarding visit times.
- Peoples care files showed evidence of how the service worked with other health and social care professionals, in providing joined up care, such as GP's and various specialists specific to peoples' conditions. These were regularly reviewed to ensure peoples current or changing needs were being met.