

Rainbow Homecare Limited

# Rainbow Homecare 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

We expect health and social care providers to guarantee people with a learning disability and autistic people respect, equality, dignity, choices and independence and good access to local communities that most people take for granted. 'Right support, right care, right culture' is the guidance CQC follows to make assessments and judgements about services supporting people with a learning disability and autistic people and providers must have regard to it.

### About the service

Rainbow is a domiciliary care agency providing personal care support. The service provides support to younger and older adults, people living with dementia, people with a learning disability and/or autistic people, people with mental health needs, physical disability and sensory impairment. At the time of our inspection there were 75 people using the service.

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

**Right Support:** People were protected from the risk of abuse and potential harm. Risk was assessed, reduced and regularly monitored to keep people safe. An assessment of care needs took place before care began and the management team worked hard to put in place the right type of support for people, to ensure they could live safely and in an unrestricted way. People were supported to have enough to eat and drink. Staff asked for consent to care and respected people's choices.

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.

**Right Care:** People's care was personal to them and met their individual care needs. People and their relatives told us care was personalised and it was regularly reviewed. People's privacy and dignity was respected, and people's independence was promoted which empowered them. Communication needs were met, and people appreciated having staff who could speak to them in their chosen language. Equality and diversity was respected and promoted. Staff were patient and treated people with kindness.

**Right Culture:** The staff team focused on providing people with quality care that met their needs and worked together with management and health professionals to ensure this happened. People and their relatives were pleased with the level of communication from Rainbow Homecare and felt listened to. Openness and transparency was important and regular audits were performed to monitor the service and seek feedback from people, relatives and staff. Learning and development was important to all staff as they valued having up to date skills and knowledge to support people who required care.

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

The last rating for this service was good (published 4 January 2018).

#### Why we inspected

This inspection was prompted by a review of the information we held about this service.

#### 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 effective?

Good ●

The service was effective.

Details are in our effective findings below.

### Is the service caring?

Good ●

The service was caring.

Details are in our caring findings below.

### Is the service responsive?

Good ●

The service was responsive.

Details are in our responsive findings below.

### Is the service well-led?

Good ●

The service was well led.

Details are in our well led findings below.

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

#### Service and service type

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

#### 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 24 hours' notice of the inspection. This was because we needed to be sure the provider or registered manager would be in the office to support the inspection.

Inspection activity started on 26 July 2023 and ended on 8 August 2023. We visited the location's office on the 26 and 27 July 2023.

#### What we did before the inspection

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 the registered manager, finance manager, field care supervisor, care coordinator, 6 care staff, 7 people who use the service and 13 relatives. We viewed 7 care files and associated risk assessments and 7 staff files including recruitment and training records. We also viewed a variety of records relating to the management of the service, including policies and procedures and quality assurance documentation.

# 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 good. The rating for this key question has remained good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People were protected from potential abuse and staff were alert to the different types of abuse.
- People told us they felt safe when they received care and support from care staff. One person said, "I am safe with [staff], they are patient and do not rush."
- Feedback from relatives also confirmed this. Relative comments included, "[Person] feels safe with the care staff" and "We are satisfied they [care staff] are looking after [person] properly."
- Staff had received safeguarding adults training and demonstrated they were aware of the process to follow should they witness or suspect abuse. A member of staff said, "I would report abuse to the office, if [registered manager] did not follow it up I can speak to the social worker or the CQC."

Assessing risk, safety monitoring and management

- The risks of potential harm was reduced as there were appropriate risk assessments in place.
- Records confirmed risk was assessed before people joined the service and was regularly monitored. Risk assessments included nutrition, manual handling, choking, medicines, equipment, diabetes and environment.
- People and their relatives told us staff followed risk assessment guidance and used equipment correctly. A relative said, "We are satisfied, they use the hoist safely."
- The Registered manager and office staff encouraged care staff to be observant and report new risks seen while providing care.
- Staff received training to support autistic people which provided them with communication skills and how to provide positive interactions to manage people who may be in distress.
- Staff told us risk assessments were clear and easy to follow. A member of staff said, "It's important we follow and comply with the guidance to keep our clients safe. If we feel the client is unsafe, we always report it to the office."

Staffing and recruitment

- The service ensured there were enough staff to provide safe care and support to people and sufficient time to make their care calls on time, a rota was prepared weekly to manage staffing levels.
- People appreciated having regular staff to provide continuity of care but understood if they received someone different due to holidays and absence as the office communicated this to them.
- One person said, "[Staff] come on time. If there is a change to my carer the office let me know beforehand." A relative said, "At the moment the service is absolutely excellent. The carer even comes 5 minutes before their time."
- The service followed their recruitment policy to ensure staff recruited were suitable for the job. Records

showed pre - employment checks were completed, these included checking references, previous work experience, right to work and a criminal record check with the Disclosure and Barring Services (DBS). DBS checks provide information including details about convictions and cautions held on the Police National Computer.

#### Using medicines safely

- People were supported to receive their medicines as prescribed.
- Relatives told us staff administered medicines to their family member on time. A relative said, "We are very satisfied with how medicines are given."
- Staff completed an in-depth training course before they could administer medicines to check their competency. Medicine equipment used in the community, for example, using blister packs and checking medicines was used to support learning and development, staff appreciated this level of detail.
- Records confirmed medicine risk assessments were completed and details of people's pharmacy were documented if there were any issues with their medicines.
- Medicine administration records (MAR) were completed and these were audited by the management team.

#### Preventing and controlling infection

- People using the service were protected from the risk of acquiring an infection and staff had access to enough personal protective equipment (PPE).
- There was an infection control policy and procedure in place and staff received training on how to reduce the risk to people they supported and themselves.
- People and their relatives confirmed care staff wore PPE while providing care. One person said, "The care workers are always in their uniforms. They also wear gloves, aprons, and masks."

#### Learning lessons when things go wrong

- Systems were in place to learn from accidents and incidents. Staff attended meetings where lessons learnt were shared and preventative measures discussed. A member said, "If there is a mistake we always learn."
- An example was provided of a previous incident. This was reported and the management team worked with health professionals to put a system in place to protect the person from potentially having a similar incident in the future, records confirmed this.



# 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.

At our last inspection we rated this key question good. The rating for this key question has remained 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

- Records confirmed an assessment of people's needs was carried out before care began, this was to ensure the service could safely and effectively provide the care people needed and wanted.
- People and their relatives confirmed a care coordinator visited the home and assessed people's needs before care began. A relative said, "Someone came to speak with us and asked [person] questions."
- A review of the initial assessment was performed after 2 weeks to monitor the care provided and to ask people and their families if care was meeting their needs.

Staff support: induction, training, skills and experience

- Staff received an induction and training relevant to their role to provide them with the skills needed.
- People and their relatives told us staff providing care were skilled at their job role. One person said, "They are very knowledgeable about their work." Another person said, "I know they have ongoing training, mine [care staff] is well trained." A relative said, "The care workers seem very well trained."
- We viewed the providers training room which was fully equipped with the equipment staff would be expected to use while providing care in the community, this ensured staff received practical experience. The registered manager said, "We run workshops to check competency for example, moving and handling. I like scenarios. I feel this training is more effective and has better impact."
- Staff completed the care certificate, received regular supervision and an annual appraisal, where applicable, records confirmed this. Staff told us supervision and support was helpful and readily available. A member of staff said, "100% I feel supported, if I have any concerns I can come to the office any time."

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

- People were supported to receive enough to eat and drink where the service was responsible.
- People and their relatives confirmed they were asked what they like to eat and drink and staff respected this.
- Staff supported people at risk of choking to eat their meals in accordance with their care plan and risk assessment. A member of staff told us. "[Person] is at risk of choking, we need to feed them warm blended food. If [person] starts to choke we put them in a safe position, if it's an emergency we call 999 immediately. We have been trained to give abdominal thrusts as part of first aid."
- During periods of hot weather, staff provided people with plenty of fluids to stay hydrated.

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

- Records confirmed people's health needs were being met and recorded in their care plan.
- The registered manager had built good links with health professionals within their local borough to support them in obtaining prompt care for people they supported.
- Records confirmed people were accessing local community health services, gp, social worker, district nurse team, learning disability team and mental health team.
- Relatives were pleased care staff kept them informed about their family members health. They said, "The care staff are kind and caring, if my wife is not well they let me know."
- Care staff told us they supported people to attend health appointments where required. A member of staff said, "We have supported people to eye appointments and to dialysis."
- Staff reported changes in people's health needs directly to the office.

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.

- Consent to care and treatment was requested before people began to receive care, records confirmed this.
- Staff understood the principles of the MCA and received training. Staff told us they asked for the permission before providing care and offered people choices for food and drink and clothes to wear. A member of staff said, "I ask and inform [people] before starting personal care, I give them choices and tell them what I am doing at each step."
- Mental capacity assessments were completed as required and best interest decisions made on people's behalf involved appropriate health professionals.

# 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.

At our last inspection we rated this key question good. The rating for this key question has remained 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 received care from care staff and a provider who was kind, compassionate and understanding.
- People were complimentary of care staff and had built trusting relationships with them. One person said, "They [care staff] are all lovely and caring." Another person said, "The [care staff] are very kind, they do their job nicely."
- Relatives were equally pleased with care staff and comments included, "The best thing is they are all very good. The carer is friendly and very nice to my wife, [care staff] have a good relationship with her" and "[Person] is very comfortable with the carers, that is the best thing. After they are finished they spend time talking to [person]."
- Staff spoke about people in a caring manner. A member of staff told us how they helped someone get a newspaper each day after they were unable to get one. They said, "To see the smile on their face, this is why we do it."
- The registered manager, management team and care staff respected people as individuals and ensured equality and diversity was respected. The registered manager said, "Diversity is about understanding, we have different cultures and languages and we bring people together and we have to respect people, we are here to help them."
- Staff received equality and diversity training and told us they did not discriminate against people regardless of their race, sexuality, gender or religion.

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

- People were supported to be involved and to express their views and what they needed from their care package.
- Staff told us they spoke to people and asked them about their needs. A member of staff said, "I asked [person] what they wanted to do, they told me they wanted to go bowling. I informed the office and we planned it."

Respecting and promoting people's privacy, dignity and independence

- People's privacy, dignity and independence was respected and promoted.
- Staff were aware of how to protect people's privacy and dignity. A member of staff said, "We have to close the door and have 2 towels, one to cover and 1 to dry. I need to respect people when providing personal care." Another member of staff said, "There is a privacy screen that we use, we make sure to cover people with towels. We must respect confidentiality."
- Independence was promoted, staff told us they supported people during personal care to wash areas they

could not reach such as their back.

# Is the service responsive?

## Our findings

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

At our last inspection we rated this key question good. The rating for this key question has remained 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

- People's care was detailed and planned to meet their individual needs, likes and dislikes, people were fully involved in planning their own care.
- Where people had expressed a preference to have a member of staff speak their language the provider accommodated this request. One person said, "My carer is very good. He speaks Hindi with me and we talk daily about my needs."
- Feedback was positive from people and their relatives about how care was designed to meet people's needs. One person said, "The company know my care needs very well. My carer is very good. I have a care plan we discuss it sometimes and the carers know all about it."

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.

- People's communication needs were clearly documented within their care plans.
- The provider understood the importance for people's communication needs to be met and they were able to provide information in different languages and formats such as large font, easy read, braille, audio format and pictorial.
- A member of staff said, "Communication is so important, where needed we use pictures and Makaton to support [person] and make them the centre of their care." Makaton is a unique language programme that uses symbols, signs and speech to enable people to communicate.
- The registered manager provided records to show they were working with the learning disability team to provide people with visual timetables to help people understand what would be happening next in their day. This had a positive impact as it supported people to be involved in understanding their care.

Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities that are socially and culturally relevant to them

- The registered manager provided opportunities for people, relatives and staff to attend community events arranged by them to prevent social isolation, this included coffee mornings, records confirmed this.
- The provider worked with the local community to find suitable activities and clubs for people with a learning disability and autistic people to join and feel included.

#### Improving care quality in response to complaints or concerns

- Systems were in place to respond to complaints and concerns. Records confirmed the provider investigated and responded in line with their policy and procedure.
- People and their relatives told us they were happy with the care provided and had not had to complain. They told us if they did need to raise a complaint, they knew who to contact and had faith it would be taken seriously.
- One person said, "I can approach the management with a complaint, but I have nothing to complain about and everything is running smooth." A relative said, "We have no complaints at all."
- We viewed a sample of complaints, and these had been acknowledged, investigated and resolved.

#### End of life care and support

- At the time of the inspection no one required end of life support. An end of life policy and procedure was in place.
- People's end of life wishes were recorded within their care plans. Staff had received training and support when they previously had to support people at the end of their lives and they ensured people were treated with dignity and respect and their family members supported.

# 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 good. The rating for this key question has remained 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

- All staff working at the service were committed to providing people with a high-quality service. This was evident from the feedback received from people and their relatives.
- Comments from people and their relatives included, "Management are very approachable", "Everything is fine with management, they always ask does [the person] need anything."
- The management team ensured they supported people as best as they could and tried different methods to support people with the support of external health professionals. A field supervisor said, "We keep persevering, we [staff] all openly discuss issues and brainstorm to see what will work for [person]. We consistently try to meet the needs of people we don't just leave it if it's not working."
- Feedback from care staff about Rainbow Homecare was consistently positive and staff were recognised for the hard work supporting people via a carer award each month and a yearly award.
- Staff told us they enjoyed working at the service and the culture of the service was family oriented. A member of staff said, "They [management] are very transparent with us, [registered manager] really cares about us and the clients." Another member of staff said, "[Registered manager] and [Finance manager] are the best, any time I need them they help and give good advice they are very nice and helpful."

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 and office staff were aware to be open and transparent and the registered manager understood their responsibilities under duty of candour were.
- Records confirmed accidents and incidents were recorded and notifications were sent promptly to the CQC and information shared with the local authority and other health professionals as needed.

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

- Systems were in place to monitor the quality of the service regularly to ensure people received care as needed and to identify any training needs.
- Records confirmed spot checks were being completed regularly. Financial records, MAR charts and people's log books were audited for accuracy and quality of the content and feedback provided to staff if any issues were identified.
- Minutes from team meetings and supervision records confirmed expectations from staff was discussed, people who were vulnerable and how staff would ensure the service would meet their needs, staff confirmed

this.

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

- The provider requested feedback from people using their service, relatives and staff to help them improve.
- People and their relatives told us they received home visits or telephone calls to ask them how their care was progressing. One person said, "They always ask my opinion, but there are no issues." Another person said, "They ask for feedback, they send a letter about the survey and sometimes we have meetings." A relative said, "They have come on one or two occasions to have a look around and analyse. I gave my feedback to them and it was positive."
- Records confirmed surveys were sent out to people and relatives, the service reviewed responses and we saw they were positive. Comments included, "The office is always supportive, carers visit on time and listen to feedback", "Well done, Rainbow" and "It helps a lot to have Punjabi speaking staff."

Continuous learning and improving care; Working in partnership with others

- Systems were in place to support continuous learning and development for all staff at Rainbow Homecare.
- Training was planned in advance so staff knew what they were expected to complete to keep their skills and knowledge up to date.
- The registered manager worked well with the local authority and was working with a consultant to support them in understanding and meeting the regulations. The care coordinator said, "[Consultant] is fantastic, they always make sure we have up to date information."
- The registered manager ensured they kept their professional skills up to date and encouraged their staff team to attend additional adult social care courses to develop their knowledge.
- The finance manager was a member of Diabetes UK and supported the staff team by providing training and sharing knowledge.