

Royale Carers Limited

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Inspection report

Rear of 130 Hobleythick Lane Westcliff On Sea Essex SS0 0RJ

Tel: 01702353547

Date of inspection visit: 02 December 2021

03 December 2021

08 December 2021

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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

About the service

Royale Carers Limited provide personal care to people living in their own houses, flats and specialist housing. This is a domiciliary care service and primarily provides a service to older people, older people living with dementia or who may have a physical disability. At the time of inspection there were 43 people using the service.

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

Staff knew the risks people needed support with, however these were not always documented in peoples care plans. People and those acting on their behalf told us they or their family member was safe, and they had no concerns about their safety. Suitable arrangements were in place to protect people from abuse and avoidable harm. Staff understood how to raise concerns and knew what to do to safeguard people. Suitable arrangements were in place to ensure people received their medication as they should, but where errors had occurred these had been investigated. Generally, there were enough numbers of staff available to support people safely. Staff recruitment and selection practices and procedures were robust. People were protected by the service's prevention and control of infection arrangements.

People told us the service was well managed. Quality assurance arrangements enabled the provider and registered manager to monitor the quality of the service provided and staff performance.

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 June 2021). At this inspection we found improvements had been made and the provider was no longer in breach of Regulation 19 of the Health and Social Care Act 2008 [Regulated Activities] Regulations 2014.

Why we inspected

This inspection was carried out to follow up on action we told the provider to take at the last inspection and to check whether the Warning Notice we previously served in relation to Regulation 19 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 had been met. As a result, we undertook a focused inspection to review the key questions of Safe and Well-Led only.

We reviewed the information we held about the service. No areas of concern were identified in the other key questions. We therefore did not inspect them. Ratings from previous comprehensive inspections for those key questions were used in calculating the overall rating at this inspection.

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 Royale

Carers Limited on our website at www.cqc.org.uk.

Follow up

We will continue to monitor information we receive about the service until we return to visit as per our reinspection programme. If we receive any concerning information we may inspect sooner.

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. | Good • |



Royale Carers 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.

This was a focused inspection to check whether the provider had met the requirements of the Warning Notice in relation to Regulation 19 (Fit and proper persons) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Inspection team

The inspection was completed 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.

The service had a manager registered with the Care Quality Commission. This means that 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 48 hours' notice of the inspection. This was because it is a small service and we needed to be sure that the provider who is also the registered manager would be in the office to support the inspection.

Inspection activity started on 2 December 2021 and ended on 8 December 2021. We visited the office location on 2 December 2021.

What we did before the inspection

The provider was not asked to complete a provider information return prior to this inspection. This is information we require providers to send us to give some key information about the service, what the service does well and improvements they plan to make.

As part of our monitoring and inspection activity we carried out a regulatory review of the domiciliary care service in August 2021, to check what improvements had been made since our last inspection to the service in April 2021. Specifically, we looked at the recruitment files for four newly employed members of staff.

We sought feedback from the Local Authority. This information helps support our inspections and we used all information to plan our inspection. We took this into account when we inspected the service and made the judgements in this report.

During the inspection

As part of the inspection process we spoke with the registered manager, office manager, training coordinator and the service's administrator. We reviewed a range of records including six people's care and support plans and reviews, risk assessments, medication administration records and staff training records. We also reviewed records used in managing the service, for example, policies and procedures and quality assurance monitoring records.

After the inspection

We contacted and spoke with five members of staff on 3 December 2021 and spoke with a total of four people using the service and six relatives on 8 December 2021.



Is the service safe?

Our findings

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

At the last inspection this key question was rated as Requires Improvement. At this inspection this key question has now improved to Good.

This meant people were safe and protected from avoidable harm.

At our last inspection in April 2021, recruitment checks on staff were not followed to ensure people's safety. This was a breach of Regulation 19 [Fit and proper persons employed] of the Health and Social Care Act 2008 [Regulated Activities] Regulations 2014. As a result of our concerns we served a Warning Notice. Enough improvement had been made at this inspection and the provider was no longer in breach of this element of the regulation.

Staffing and recruitment

- Suitable arrangements were in place to ensure staff employed had the appropriate checks undertaken and were suitable to work with vulnerable people.
- There were enough staff available to provide care and support as detailed within their support plan. People confirmed they mostly knew who was going to provide care on any given day and new staff employed by the domiciliary care service were always accompanied and supported by more experienced staff.
- The registered manager confirmed the service had experienced staffing challenges as a result of workforce pressures from COVID-19. Where these were not related to COVID-19 challenges, the registered manager had investigated these to ensure lessons learned and to mitigate risks for people using the service.
- People told us there were times when staff arrived later than planned. People confirmed they were usually contacted if staff were running late and received an apology. One person told us, "They [Royale Carers Limited] have been looking after me and come in four times a day. If they [staff] are going to be really late, someone calls me." One relative told us, "We do generally get a call if they are running really late and did have a missed call right back at the beginning, but that was a communication issue and they [domiciliary care agency] apologised."

Systems and processes to safeguard people from the risk of abuse

- People told us they felt safe and had no concerns about their safety or wellbeing when staff visited them. One person told us, "I certainly don't have to worry when they [staff] are looking after me, although you do have your favourite ones, that's normal." One relative told us, "Staff made sure [relative] was okay and that they knew who to phone if there was a problem. As a family we knew they were safe and well looked after."
- Information shared with us demonstrated there had been one safeguarding concern raised since our last inspection in April 2021. This had been investigated in conjunction with the Local Authority to ensure people were safe.
- Staff had a good understanding of what to do to make sure people were protected from harm or abuse. Staff confirmed they would escalate concerns to the office and external agencies, such as the Local Authority or Care Quality Commission.

Assessing risk, safety monitoring and management

- Although we found no evidence to suggest people had been harmed, risks for people were not always identified and recorded in relation to people's care and support needs. Additional information was required to demonstrate how risks to a person's wellbeing and safety were to be mitigated. This was discussed with the office manager. An assurance was provided this would be discussed with the registered manager and addressed.
- However, all staff spoken with were aware of people's individual risks and how to help keep them safe whilst reducing any restrictions on people's freedom. Therefore, we were assured there was no impact on people's care.
- Risk assessments were completed for people using the service and staff in relation to the risks posed and presented by COVID-19.

Using medicines safely; Learning Lessons when things go wrong

- People told us they received their medicines as they should. One person told us, "They [staff] give me my medication and it all gets written down in the book."
- Suitable arrangements were in place to audit people's Medication Administration Records [MAR]. This enabled errors to be identified at the earliest opportunity and lessons learned. Where corrective actions were highlighted, a report was completed by the registered manager detailing the nature of the error and actions taken. The latter included contacting staff to remind them to sign the MAR.
- Staff had received medicines training. However, we found some training was out of date. Immediate steps were actioned to ensure staff updated their training at the earliest opportunity.

Preventing and controlling infection

- No concerns were raised with us relating to staff not wearing appropriate Personal Protective Equipment [PPE]. One person told us, "It's more than their [staff] jobs worth to come without wearing their masks, gloves and aprons. I have had no problems throughout the pandemic. I have felt very safe." A second person told us, "They [staff] all wear their gear [PPE] and I remember they do change their gloves after they have washed me all over."
- One relative told us, "The carers all wear their PPE and take it with them when they go."
- Staff confirmed they had enough supplies of PPE and had received appropriate infection, prevention and control training, including COVID-19 and 'donning and doffing' training.
- Staff undertook regular COVID-19 testing to reduce the risk of infection.



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 the last inspection this key question was rated as Requires Improvement. At this inspection this key question has now improved to 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; Continuous learning and improving care; 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 management team promoted a positive culture which focused on people receiving person centred care and achieving the best outcomes for people using the service.
- Suitable arrangements were in place to monitor the quality of the service provided. Information was used to help the provider drive improvement, including the monitoring of potential trends to identify issues and ensure that lessons were learned. For example, audits relating to care planning, medication and the service's recruitment practices were in place to monitor and improve the quality and safety of the service.
- The registered manager understood their duty to be honest with people when things went wrong and demonstrated a good understanding of their responsibilities in relation to duty of candour.

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

- Staff understood their role and responsibilities. They were aware of the procedures and policies they needed to follow and what information they needed to share with the service.
- Staff were positive about working at the service and consistently described the registered manager and office manager as supportive and approachable. All staff confirmed they felt valued. One member of staff told us, "The registered and office managers are great and always at the end of the phone, they always get back to you." A second member of staff told us, "Communication with the management team is good, I feel very supported."
- Staff received formal supervision and 'spot visits' were undertaken at regular intervals. The latter is where the provider's representative can observe a member of staff as they go about their duties to ensure they are meeting the organisations values, standards and expectations.

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

- The management team engaged with people, their relatives and staff employed at the service through reviews and satisfaction surveys.
- People using the service and those acting on their behalf were complimentary about the care received and

provided by the domiciliary care service. One relative told us, "Most of the staff treat [relative] as they would their own mum." Another relative told us, "The staff on the whole are kind, considerate and recognise relative's limitations. They [staff] make sure their glasses are on, a drink is in reach and they are comfortable before they leave." People told us most staff chatted with them, treated them like a friend and they looked forward to them coming.

- People told us communication with the domiciliary care service was good. One relative told us, "Communication is very good and there is always someone at the end of the phone if you call. Another relative told us, "The office is always very helpful and gets straight back to you."
- People told us they would recommend the domiciliary care service to others. Comments included, "I would recommend the company to anyone, they go the extra mile" and, "We would consider using them [Royale Carers Limited] for another family member if it was needed and would certainly recommend them to others who need help at home."

Working in partnership with others

• The management team were able to demonstrate they were working in partnership with others, such as the Local Authority and other healthcare professionals. For example, the management team were liaising with the Local Authority and healthcare professionals to support a change of moving and handling equipment for one person.