

Rapid Improvement Limited

Rapid Improvement Care Agency

Inspection report

34-38 Upper Green East
Mitcham
CR4 2PB

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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	

Overall summary

This was an unannounced inspection that took place on 7 September 2015. At our previous visit on 23 February 2015, we judged that the service was meeting all the regulations that we looked at. Rapid Improvement Ltd is a domiciliary care agency providing personal care and support for 13 people with physical disability living in their own homes.

The service had a registered manager in post. A 'registered manager' is a person who has registered with

the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.

People told us they felt safe with the service they received. There were arrangements in place to help safeguard people from the risk of abuse. The provider had appropriate policies and procedures in place to

Summary of findings

inform people who used the service, their relatives and staff about how to report suspected abuse. This meant appropriate action was taken to deal with suspected abuse and help provided to protect people who use services

People had risk assessments and risk management plans to reduce the likelihood of risk. Staff knew how to use the information to keep people safe.

The registered manager ensured there were safe recruitment procedures to help protect people from the risks of being cared for by staff assessed to be unfit or unsuitable.

Staff received training in areas of their work identified as essential by the provider. We saw documented evidence of this.

People told us they did not receive assistance from the agency staff with the administering of medicines and this was confirmed by staff.

People said they were treated with kindness and compassion in the care they were provided with by staff and they said that their care was good.

Staff told us they received training on how to promote and maintain people's dignity and privacy. This had helped people to feel they mattered and were understood.

Staff respected people's privacy and dignity. People said staff asked them how they would like things to be done and were polite.

Staff told us that wherever possible people were encouraged to maintain their independence and undertake their own personal care. Where appropriate staff prompted people to undertake certain tasks rather than doing it for them.

People told us they were involved in the care planning process and they said the service responded to their needs and individual preferences. People also said that staff supported people according to their personalised care plans, including supporting them to access community-based activities.

The provider encouraged people to raise any concerns they had and responded to them in a timely manner. People were aware of the agencies' complaints policy.

People gave positive feedback about the management of the service. The managers were clear in their views about the importance for service improvement based on feedback provided by their surveys. They told us their aim for the service was to progress towards providing a better standard of care. We found there was a positive management ethos that included an open and positive culture with approachable staff and a clear sense of direction for the service.

Summary of findings

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. People told us they felt safe. Safeguarding procedures were robust and staff understood how to safeguard the people they supported.

Risks to people and staff were assessed and well managed. People's care plans provided clear information and guidance to staff.

Recruitment practice was safe and thorough. The registered manager ensured there were appropriate staffing levels to meet the needs of people who used the service.

People we spoke with told us that staff did not administer medicines for them and we therefore did not assess how the service managed people's medicines.

Good



Is the service effective?

The service was effective. People told us they thought the service was effective and that staff had the skills and knowledge to meet their needs. We saw that staff received regular training, supervision and appraisals to ensure they had up to date information to undertake their roles and responsibilities.

Staff told us they thought the agency provided a good programme of support for them that helped them to do their jobs effectively.

People were supported to eat and drink according to their plan of care.

Staff supported people to attend healthcare appointments and liaised with other healthcare professionals as required if they had concerns about a person's health.

Good



Is the service caring?

The service was caring. People who used the service told us they found the staff supportive and caring. People liked the consistency and continuity of having the same regular staff to support them.

People said staff treated them well and were respectful of their privacy.

People were involved in making decisions about their care and the support they received.

Good



Is the service responsive?

The service was responsive. People were involved in developing the care planning process and they told us their care plans were regularly reviewed and met their care and support needs.

Staff supported people to access the community and this reduced the risk of people becoming socially isolated.

People were aware of the agency's complaints policy and knew how to make a complaint if they wanted to do so. We saw there was an appropriate complaints policy and procedure in place that staff were also aware of.

Good



Summary of findings

Is the service well-led?

The service was well-led. The managers regularly checked the quality of the service provided and made sure people were happy with the service they received. The managers were clear in their views about the importance for service improvement based on feedback provided by their surveys. They told us their aim for the service was to progress towards providing a better standard of care.

We found there was a positive management ethos that included an open and positive culture with approachable staff and a clear sense of direction for the service.

Good



Rapid Improvement Care Agency

Detailed findings

Background to this inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection was planned to check whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

This inspection took place on 7 September and was unannounced.

This inspection was carried out by a single inspector. We reviewed the information we had about the service prior to our visit and we looked at notifications that the provider is legally required to send us about certain events such as serious injuries and changes within the organisation.

We gathered information by speaking with four people and their relatives, the director, the registered manager, the deputy manager and two members of staff. We looked at the four people's care records and five staff records and reviewed records related to the management of the service.

Is the service safe?

Our findings

We spoke with people who used the service and they told us they felt safe and they trusted the staff. One person said, “I have had the service now for more than a year and overall they have been good. We like our regular carers because we know who they are and we feel safe with them.” Another person said, “I like to have my regular carers because I know them and they know me and what we need doing. They do wear their identity badges and yes I feel quite safe with them.” We saw staff in the offices wearing their identity badges. This has helped people who use the service to feel safe and to know exactly the caller’s identity and where they are from.

Staff told us they had received all the training they needed to carry out their safeguarding roles and responsibilities. They described to us how they would recognise the signs of potential abuse and how they would respond to any abuse they might encounter. They said they would report it appropriately to the local authority and to the Care Quality Commission (CQC). Staff referred to the various types of abuse that they might encounter and knew how they could escalate any concerns that they might have. We looked at the staff training records and we saw that all the staff had completed a safeguarding adults course in the past twelve months. The registered manager also told us that any concerns or safeguarding incidents were reported to the CQC and to the local authority safeguarding teams. We saw documented evidence for the one concern that had been reported as stated and was followed up via local authority safeguarding conferences.

The registered manager showed us a copy of Pan London's safeguarding policy that was in the office for reference purposes – “Protecting adults at risk; London multi agency policy and procedure to safeguard adults from abuse.” We saw the provider also had policies and procedures to do with staff whistle blowing, how to make a complaint, and reporting accidents and incidents. Staff told us they had read these policies and they had signed to say they had read and understood them and they knew what actions to take if necessary. This had helped to protect people from the risk of abuse.

We saw people had individual risk assessments and we saw risk management plans in their care files. We saw they had been developed together with people in order to agree ways of keeping them safe whilst also enabling them to

have choices about how they were cared for. One person’s risk assessment stated they had a particular condition which made it difficult for them to eat and drink. There was information about how assistance was to be given for the person when eating and drinking so they were safe. There was a detailed food and nutrition plan in place that met their specific needs in relation to their condition which had been compiled together with the person and with information provided by the GP. Staff used this to assist the person with the preparation of their meals. When we looked at people’s care files we saw that risk management plans had been followed appropriately by staff.

The service had other risk assessments and risk management plans in place to ensure that risks were minimised for staff. Part of the initial assessment process included an environmental risk assessment that identified any potential hazards or risks that staff might face. We saw on the care files we reviewed there were action plans in place for staff to follow in order to reduce the potential hazards and risks identified.

Staff told us they were required to undertake regular training that covered all the areas of their work and included manual handling, health and safety, infection control, food hygiene, and safeguarding vulnerable people. They said this training programme had helped them to do their work safely with people. We were shown training certificates that evidenced all staff had attended these training courses within the last year.

We inspected staff files and saw they contained evidence that recruitment checks had been carried out before staff were employed. These included criminal record checks, proof of identity and the right to work in the UK, declarations of fitness to work, two suitable references and evidence of relevant qualifications and experience. This showed the provider had taken appropriate steps to protect people from the risks of being cared for by unfit or unsuitable staff.

People told us they sometimes had two care workers to help them with some of the support they were provided with. The registered manager told us that before any service were provided for people, an initial assessment of their needs was carried out. This assessment together with the risk assessment helped to identify what level of staffing was required to carry out the tasks identified in the care

Is the service safe?

plan. Where more than one member of staff was required this was identified in the care plans that we inspected. The registered manager told us that when a person's needs changed, the level of staff cover was adjusted accordingly.

People told us they did not have assistance with their medicines and that this was given by their relatives. They

did say that staff sometimes reminded them or their relatives it was time to take their medicines. Staff also told us that they did not administer medicines to people. The registered manager said staff were not expected to administer medicines to people.

Is the service effective?

Our findings

People said they thought staff did a good job and knew what they were doing. One person said, “I don’t have any complaints with the help we receive, our carers seem to know what they are doing.” Another person said, “They are ok... they do what we need them to do. I am happy they do an effective job for us.”

Staff told us they had induction training at the start of their work with this agency. They said they had found it useful in preparing them for their work. We saw written evidence of the induction training staff had received. One member of staff told us they shadowed a more experienced member of staff before they started working with people and they said, “This was really valuable experience.” Other staff said training they had received whilst working at Rapid Improvement Agency was good. They said it had improved over the last year and they had gained enough knowledge and skills to be able to manage situations that arose whilst carrying out their jobs. One member of staff told us, “We have to do a mandatory training course that covers a lot of important areas to do with our jobs; we found this helpful.” We looked at staff training records which confirmed that staff had received all the training assessed by the provider as being essential. This has helped them deliver care and support to people more effectively.

We were told by staff that they received annual appraisals of their work and we saw evidence of this when we inspected their staff files. All the staff files we inspected had had an appraisal within the last year. We saw this included a review of their working practices and training needs and a training and development plan for the year ahead. This had helped to ensure staff were working in line with the agency’s policies and procedures and were appropriately supported to carry out their work effectively.

All of the people who received care and support from this agency at the time of this inspection were funded through direct payments and were able to make their own decisions about their care. The Rapid Improvement Agency had appropriate contracts in place with each person whose files we inspected. The registered manager told us that if they had any concerns regarding the person’s ability to make decisions they would work with the local authority to ensure appropriate capacity assessments were undertaken. No one had needed this up to the time of this inspection.

We saw records that demonstrated the registered manager also had relevant qualifications to equip staff with the skills and knowledge to make sure people’s needs were met appropriately. The registered manager told us that staff were supported to keep up to date with best practice both by in house training and by external training such as that offered by the local authority.

The deputy manager told us all staff were supported with a range of regular supervision that included one to one supervision and spot checks. They said they believed this provided staff with the best support to enable them to do their jobs effectively. We saw up to date supervision records for staff that evidenced they had regular supervision every six to eight weeks. The records we saw also showed the service had plans for developing staff in terms of training and further qualifications which were discussed during supervision meetings and then followed up. Staff told us the registered manager was always available to provide informal support to help them provide effective care to people. The registered manager told us they had regular team meetings and they discussed aspects of good practice to ensure care was being delivered to a consistent standard. We saw the minutes of these meetings over the last year that evidenced this.

People told us that some of the care and support provided to them by staff involved the preparation of food and the provision of support at mealtimes. Care plans we inspected detailed where this support was needed and how it was to be provided. In some cases staff were required to reheat meals that had already been prepared and then to ensure that they were accessible to people. Where staff prepared meals for people, people told us that they were asked what they would like to eat and then their choices were prepared for them. Staff told us they helped some people to eat their meals as and when it was necessary and as detailed in people’s care plans. Staff also told us that before they left their visit they ensured people were comfortable and had access to food as well as drinks.

People said their health care appointments and health care needs were arranged by themselves or their relatives but that staff helped them to attend the appointments as necessary. Staff also told us they supported people to attend healthcare appointments and liaised with other healthcare professionals where it was part of the person’s care plan and we saw evidence of this on the care plans we inspected.

Is the service caring?

Our findings

People told us they were treated with kindness and compassion in the care they received from staff and they said their care was good. One person said, "I couldn't manage without them, the support we get really helps." Another person said, "I wouldn't be able to live at home without the care and support I get from them every day."

People told us that at the start of their service they had a meeting with the registered manager from the agency who discussed the help and support they needed and how they would like the agency to help them. One person said, "The registered manager came round to see me and we discussed what help I wanted and how I would like that help to be provided."

Staff told us they knew what support people needed from reading the care plans and from talking to people. Staff said they took time to speak with people to ask how they would like their care and support to be provided in a way that suited them best. One member of staff said, "At the start with a new person we have to read their care plans and that sets out what needs to be done. I always check with people as well." Another member of staff said, "I ask people how they would like me to call them. I think how I would like to be treated and I try and respect them in the same way especially when I'm providing personal care."

The agency arranged for staff to receive training on how to promote and maintain people's dignity and privacy. This helped people to feel they mattered and were understood.

Care plans that we saw were personalised and provided detailed person centred guidance for staff about how their individual needs and preferences should be met. Care plans included information about people's wishes and preferences, for example their food and drink preferences and the way they wanted their care to be given. There was also some information about their personal life histories that helped staff understand people's backgrounds. This included information to do with people's disabilities, race, sexual orientation and gender and all this helped staff to support people in a caring way. Staff told us they found this information helpful in getting to know the people they supported better, especially at the start of care being delivered. The registered manager told us that wherever possible they tried to maintain continuity and consistency of care and support. They said their staff usually worked with the same people every week except when off sick or on holidays.

Staff respected people's privacy and dignity. One person said, "My carers always ask me how I would like things to be done. They are polite to me." Another person said, "We have had two carers daily now for some time so they know what we want help with. They always ask us anyway what we would like to be done on the day as well."

Staff told us that wherever possible people were encouraged to maintain their independence and undertake their own personal care. Where appropriate staff prompted people to undertake certain tasks rather than doing it for them. A person we spoke with told us, "They encourage me to do things for myself."

Is the service responsive?

Our findings

The service was responsive. People told us after they were referred to the agency for their care, the registered manager visited them in their homes and undertook a joint needs and risk assessment together with them. They said this was to identify exactly what care they needed and how they wanted their care to be provided. People told us they were able to contribute to the process and they said they felt central to it. They said their care plans reflected their wishes and their contribution. People said they were happy with the care they received. They said staff were responsive to their needs on the day if they had other things they needed help with.

We saw people had signed their care plans to show their agreement with what had been written down for them. People told us they had copies of their care plans in their homes that staff referred to. People were supported to do their social activities and to engage with the community. From our inspection of people's care plans we could see that some of the care people received included taking

them to healthcare appointments or other social activities such as to a day centre or going shopping. All the care plans we inspected had been reviewed six monthly and was done together with the person involved.

People we spoke with told us they knew what to do if they were unhappy about something and they felt they were able to talk to the registered manager or staff about anything. We were shown the provider's complaints policy and procedure. The agency also provided people with their handbook that explained all the policies and procedures and this included the complaints process and what they could do if they were not happy with the quality of service they received. From the complaint records that we inspected we saw that they had been resolved with the complainant satisfactorily and the process followed was within the agencies' policies and procedures for complaints. The registered manager told us they reviewed any complaints or concerns made and this had provided them with the opportunity to improve the service appropriately

Is the service well-led?

Our findings

The service was well led. People told us they thought the service was good. One person said, “They do what we ask them to do. We could not manage without their assistance. I think it is well led.” Another person said, “They do care about how the service is run and they ask us for our opinions and change things if needed.”

At our inspection of this service we found there was a positive management ethos that included an open and positive culture with approachable staff and a clear sense of direction for the service. Staff agreed that this was a fair reflection. They said the service was forward looking and the registered manager considered how the staff team could provide people with better standards of care and support. Staff told us the registered manager was keen to ensure continuity and consistency in the way their service was provided for people. Staff also said they had been given training opportunities to help them widen their knowledge and skills base. Staff said they were encouraged to learn and develop professionally, which they said was motivating and helped them to take pride in their work.

The deputy manager told us that people’s views were sought formally about aspects of the running of the service via quality assurance feedback forms. We were shown the returns from the last survey carried out in July 2015 which were positive. The deputy manager said in addition to this they telephoned every person who received a service to check on their satisfaction with what was provided for them. The feedback from this was recorded and we saw it was also positive. The deputy manager was clear in their views about the importance for improvement based on feedback provided by these surveys. They told us their aim for the service was to progress towards providing a better standard of care.

The registered manager and the deputy manager informed us of other ways they monitored the quality of the service apart from regularly speaking with people to ensure they were happy with the service they received. They told us they carried out a combination of announced and unannounced spot checks to review the quality of the service provided. This included arriving at times when the staff were there to observe the standard of care provided and coming outside visit times to obtain feedback from the person using the service. The spot checks also included reviewing the care records kept at the person’s home to ensure they were appropriately completed. One person who used the service told us, “Someone comes to see us to make sure we are alright.” Staff told us senior staff often came to observe them at people’s homes to ensure they provided care in line with people’s needs and to an appropriate standard. A staff member told us, “We have spot checks done by senior staff to see how we are doing. We don’t know when they’ll be there; it keeps us on our toes.” Another person said, “The standard of care is very good, senior staff come and ask us whether we are happy with it or not.” The registered manager told us if any concerns were identified during spot checks this was discussed with individual staff members during one to one meetings so the concerns were addressed.

Meetings were held with staff about the general running of the service and issues to do with best practice discussed so that improvements could be made. We saw minutes of three meetings that had been held since the last inspection. The agenda for these meetings included time keeping and there was discussion about the new reporting mechanisms that had been put in place specifically to improve time keeping for visits to people. We saw that there had been an improvement in the contacts made with people to keep them informed where delays occurred.