

APT Care Limited

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Inspection report

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Ratings

Overall rating for this service

Inspected but not rated

Is the service well-led?

Inspected but not rated

Summary of findings

Overall summary

This announced inspection was carried out on 13 November 2018. APT Care Ltd Nottingham provides support and personal care for people living in their own homes in Nottingham. On the day of the inspection visit there were 41 people using the service who received personal care.

We carried out an announced comprehensive inspection of this service on 12 and 13 July 2018. Breaches of legal requirements were found and we issued a warning notice in relation to one of these breaches. We asked the provider to act to ensure that the service was responsive to the needs of the people who used the service. We asked the provider to send us an action plan to show how they would address our concerns. We received the action plan on the 6 September 2018.

We undertook this focused inspection to check that the provider had made the improvements against their action plan and now met legal requirements. This report only covers our findings in relation to those requirements. You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for APT Care Ltd Nottingham on our website at www.cqc.org.uk.

The service had a registered manager in place at the time of our inspection. 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 received care from a provider who was implementing quality monitoring processes to improve the care they provided. Systems were in place to ensure the quality of the service was monitored and there were improvements in the care people received because of the quality monitoring processes now in place.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service well-led?

We could not improve the rating for well led from inadequate because to do so requires consistent good practice over time. We will check this during our next planned comprehensive inspection.

Inspected but not rated

APT Care Limited

Detailed findings

Background to this inspection

We undertook an announced focused inspection of APT Care Limited, Nottingham, on 13 November 2018. This inspection was done to check that improvements to meet legal requirements planned by the provider after our comprehensive inspection on 12 and 13 July 2018 had been made. We inspected the service against one of the five questions we ask about services: Is the service well led? This is because the service was not meeting some legal requirements. The inspection was undertaken by one inspector.

Prior to our inspection we reviewed information we held about the service. This included the previous inspection report, information received and statutory notifications. A notification is information about important events which the provider is required to send us by law.

During the inspection we spoke with the nominated individual, the registered manager and the care co-ordinator.

We considered information contained in some of the records held at the service. This included three care plans, risk assessments, three staff records, complaints and the records kept by the registered manager as part of their management and auditing of the service.

Is the service well-led?

Our findings

When we inspected this service on the 9 and 15 December 2016 we found the provider to be in breach of Regulation 17 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 Good governance. Following this inspection, the provider sent us an action plan to show how they would address the concerns we found at that inspection. When we revisited on 12 and 13 July 2018 we found the provider was in continued breach of Regulation 17 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014, and they had failed to meet the actions identified in their action plan.

We identified several shortfalls in the way the service was managed. There continued to be a lack of systems in place to monitor the service and this had continued to affect the quality of care people received from the service. The lack of robust quality monitoring had resulted in a lack of oversight from the management team

We found risk assessments had not been sufficiently reviewed to provide staff with detailed information of action required of them to mitigate any risks associated with people's assessed needs. The identified actions in the provider's action plan to introduce monthly telephone calls to people using the service to gather their feedback, had not been introduced. The system used to monitor concerns and complaints was ineffective. The providers electronic call monitoring system to provide an over sight of the calls made by staff to people had also not been introduced.

Staff had not received regular supervision to ensure they were adequately skilled and to identify areas of improvement and there were shortfalls in the systems and processes in place that monitored staffing. Some staff did not have name badges and the registered manager was unable to identify which staff this applied to. This meant staff may be entering people's homes without identification, we also found a lack of interview notes in staff files to show interviews had taken place. Some staff were also discontented due to perceived favouritism by the registered manager towards some members of staff in relation to how the staff rota was managed.

Additionally, we found the Mental Capacity Act 2005 (MCA) had not been complied with.

During this inspection, we saw the registered manager had introduced several quality monitoring systems that improved the oversight of the service and had a positive effect on the quality of care people required. We also found the provider had increased the support for the registered manager who at the last inspection had needed to undertake care calls on top of their management duties.

The registered manager had a system in place to monitor people's care plans and improve the information for staff providing care. The short falls in the risk assessments found at the last inspection had been addressed. Such as a lack of information on how staff should monitor people's underlying health conditions. This improvement in information for staff and the manager's systematic approach to reviewing the information in people's risk assessments, meant the registered manager was continuing to work to improve this aspect of people's care.

At the last inspection we found the registered manager had not complied with the MCA. When people lacked

capacity to make particular decisions about their care, a mental capacity assessment had not been completed. During this inspection we saw the registered manager had begun to identify people who may need support with decision making, and mental capacity assessments had started to take place. The company director had undertaken further training to support the registered manager in this area of practice and had produced guidance documents for staff when undertaking assessments. There was also a plan in place for the registered manager to undergo the same training. The registered manager told us they had a better understanding of their responsibilities in relation to MCA, but hoped to further improve their knowledge to ensure people were supported with this aspect of their care.

At the last inspection we found an ongoing issue with the lack of an electronic call monitoring system, and lack of a robust replacement monitoring system, had led to some calls to people being late or the management team not being aware if calls had been missed. At this inspection, we found the electronic call monitoring system had still not been introduced, the registered manager told us the company's information technology team were still trying to resolve some issues with the system. However, the registered manager had introduced an alternative system that meant they could monitor calls as they occurred. We saw staff provided information by text to the registered manager or care co-ordinator, when they arrived at a person's home and when they left. The registered manager or care co-ordinator then manually inputted the data onto a template that showed the calls each person should receive each day. The registered manager had begun to undertake a monthly audit of this information to show if there were any shortfalls and any trends. The registered manager told us once the electronic system was in place this would reduce the work inputting manually generated, but the monthly analysis of the calls would continue to monitor the quality of this aspect of care.

At the last inspection, we found staff had not received regular supervision and there were not processes in place to support the manager to identify when staff supervision or observations of practice were due. During this inspection, we viewed the registered manager's process for identifying several areas of staff development. Staff supervisions, appraisals and observations of practice were highlighted on a spreadsheet that flagged up to the registered manager when training, supervision or observations of practice were due. The registered manager could identify when staff required update training in different areas and when they were due to undertake the training.

We viewed three staff files that showed evidence of the supervisions, observations of practice and training certificates of completed training. We also saw one person who had been employed following our last inspection had interview notes recorded in their staff file. The registered manager was also able to show us staff members had name badges except for two new members of staff. We also saw on observations of practice the registered manager had identified one member of staff not wearing their badge, and had reiterated the need to wear their identification as per the company's service user guide. This showed the registered manager had addressed the concerns we had with staff monitoring and support.

The registered manager told us they had not been able to introduce the monthly telephone calls to people who used the service, to gain their views on the service they received, as they had been working to prioritise the other concerns we had raised at our last inspection. However, the nominated individual had taken all the contact details of the people who used the service and just prior to our inspection had a member of staff from another branch of the company make a small number of calls to people who used the service in Nottingham. They could show us how the company had used the monthly telephone calls to get feedback from people in other branches. They told us they would be using the same process at this branch, but whilst the registered manager needed this support they would provide support from another branch of the company. This showed the provider was working towards addressing our concerns in relation to listening to people's views on the service.

We also saw evidence of the improvements the registered manager had made in dealing with complaints to the service. There was clear information of the complaints and what the registered manager had done in response to the complaints. This also tied in with the information we viewed in staff files as issues raised as a complaint had been clearly addressed with staff to ensure everyone was aware of their responsibilities.

The nominated individual discussed the support the registered manager had received from them in the last few months. Since our last inspection the nominated individual, quality assurance manager and other senior managers had regularly visited the service to support the registered manager. The nominated individual showed us their records of their visits and the issues they had addressed with the registered manager. For example, they had worked with the registered manager to address issues in relation to the staff rota. The registered manager told us they had been to another branch of the company to see how they undertook their staff rotas. Then together with the nominated individual had worked with staff to show their availability and what the company expectations of them were. Following this the registered manager had worked on the newer style of rota. They told us they felt it was a simpler system and with the support of the senior management team, they felt the management of the rota had improved.

The nominated individual also told us they had just recruited an operational manager who they had employed to support the registered manager. The nominated individual told us they wanted to expand the business in Nottingham and Nottinghamshire, but wanted to be sure the right structures were in place to support this business plan.

The evidence gathered at this inspection shows the provider is no longer in breach of Regulation 17 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. As they had worked to put in a sustainable quality monitoring system that had positively impacted on the care people who used the service received.