

Ave Maria Care Ltd

Ave Maria Care (Wolverhampton)

Inspection report

Kings House
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12 April 2023

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11 May 2023

Ratings

Overall rating for this service

Requires Improvement ●

Is the service safe?

Inspected but not rated

Is the service well-led?

Inspected but not rated

Summary of findings

Overall summary

About the service

Ave Maria Care Wolverhampton is a domiciliary care agency providing personal care to people living in their own homes. The service provides support to older people, younger people, and people with dementia. There were 23 people using the service at the time of our inspection.

Not everyone who used the service received personal care. CQC only inspects where people receive personal care. This is help with tasks related to personal hygiene and eating. Where they do, we also consider any wider social care provided

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

Systems were developed and put in place in response to the concerns raised during the last inspection. These included concerns over safeguarding, care planning and governance. Improvements were made to the quality auditing processes and safe care and treatment. The provider also introduced specialist staff training to support people with specific conditions and they reviewed their auditing and governance systems to have a clearer oversight of the service provided.

The provider employed a new administer to support them with the monitoring and auditing processes and they developed a new senior carer role to assist with the oversight of people's care and staff. The registered manager was keen to develop a culture of improvement, partnership working and transparency.

The provider monitored the quality of care and support provided to people. The provider completed regular audits of the care plans, risk assessments and medicine administration. Improvement was identified and acted upon in a timely manner.

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 4 February 2023).

At our last inspection we found breaches of the regulations in relation to safe care and treatment, safeguarding and good governance, which meant there was a lack oversight of risk within the service to keep people safe. The provider was made aware of our concerns and the improvements which were required to be completed by 31 December 2022.

At this inspection we found improvements had been made and the provider was no longer in breach of regulations.

Why we inspected

We undertook this targeted inspection to check whether the Warning Notices we previously served in

relation to Regulations 12, 13 and 17 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 had been met. The overall rating for the service has not changed following this targeted inspection and remains requires improvement.

We use targeted inspections to follow up on Warning Notices or to check concerns. They do not look at an entire key question, only the part of the key question we are specifically concerned about. Targeted inspections do not change the rating from the previous inspection. This is because they do not assess all areas of a key question.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Ave Maria Wolverhampton on our website at www.cqc.org.uk

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?

At our last inspection we rated this key question requires improvement. We have not reviewed the rating as we have not looked at all of the key question at this inspection.

Inspected but not rated

Is the service well-led?

At our last inspection we rated this key question requires improvement. We have not reviewed the rating as we have not looked at all of the key question at this inspection.

Inspected but not rated

Ave Maria Care (Wolverhampton)

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 targeted inspection to check whether the provider had met the requirements of the Warning Notices in relation to Regulation 12 (Safe care and treatment), Regulation 13 (Safeguarding) and Regulation 17 (Good Governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 on concerns we had about we had about lack of oversight of risk within the service to keep people safe.

Inspection team

The inspection was carried out 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

We gave the service 24 hours' notice of the inspection. This was because the service is small and people are often out and we wanted to be sure there would be people at home to speak with us.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority and professionals who work with the service. 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

During the inspection, we spoke with 5 members of staff, which included the registered manager, the area manager, senior staff, and care staff. We used electronic file sharing to enable us to review additional documentation.

We reviewed a range of records. This included 4 people's care records and medication records. We looked at safeguarding records and we looked at a range of records relating to the governance and management of the service.

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 this key question was rated requires improvement. We have not changed the rating as we have not looked at all of the safe key question at this inspection.

The purpose of this inspection was to check if the provider had met the requirements of the warning notices, we previously served. We will assess the whole key question at the next comprehensive inspection of the service.

Systems and processes to safeguard people from the risk of abuse

At our last inspection the provider failed to ensure systems and processes were operated effectively to protect people from potential risk of abuse. This was a breach of regulation 13 (Safeguarding service users from abuse and improper treatment) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. At this inspection we found improvements had been made and the provider was now meeting this regulation.

- Systems to protect people from abuse were now in place.
- During the last inspection the system for reporting abuse was not clear for staff or managers. At this inspection the provider had improved their system for reporting safeguarding concerns which meant staff knew how to report concerns appropriately.
- During the last inspection the registered manager was unclear on what to report as a safeguarding. At this inspection the registered manager told us what constitutes a safeguarding and showed us they had acted on concerns and how they had appropriately passed them onto the safeguarding authority.
- At the last inspection staff could not always tell us what safeguarding meant or who to report it to. At this inspection staff were now able to tell us about the different types of abuse and what to do if they had concerns. One staff member said, "I know I need to report unexplained bruises or marks. I know I must tell the manager and the council or CQC if the manager doesn't do anything."
- Staff told us they received safeguarding training regularly and we saw evidence of this.

Assessing risk, safety monitoring and management, Using medicines safely

At our last inspection the provider had failed to ensure safety alert systems were effective and risks to people's safety reviewed. Medicine administration was not always effective which increased the risk of harm occurring. This was a breach of Regulation 12 (Safe care and treatment) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. At this inspection we found improvements had been made and the provider was now meeting this regulation.

- The provider now had systems in place to ensure safety alert systems were effective and risks to people's safety reviewed.

- During the last inspection we found the provider did not ensure safety alert systems were effective or risks to people's safety were reviewed. At this inspection the provider had introduced new systems to ensure managers were aware of safety alerts sent through from staff and these were acted on. We also saw care plans were reviewed in a timely manner.
- During the last inspection we found care plans did not always contain information about people's health conditions. At this inspection the registered manager had updated peoples care plans to include specific guidance for staff to support people with their health conditions and reviewed them regularly.
- During the last inspection staff were not always trained in peoples specific health conditions. At this inspection the registered manager had sourced training for specific health conditions which staff had completed since the last inspection. Staff told us they had read the updated care plans and completed the training and explained how this had helped them know how to support people better.
- Peoples medicines were now administered safely.
- At the last inspection time specific medicines were not always administered at the correct time. At this inspection the registered manager told us they no longer support anyone to take time specific medicines, however they did show us their rotas to confirm care calls were now being delivered within the contracted hours, so medicines were not being administered late.
- At the last inspection staff were unaware of side effects of medicines or where to find information about them. At this inspection we found the registered manager added medicines side effects to peoples care plans, so staff knew what they were and what to do if people did have an adverse reaction to their medicines. Staff told us they knew about medicines side effects. One staff member told us, "The side effects are recorded on the care plan and the electronic medication administration record (EMAR) now and if someone had a reaction, I would call 111 or 999 and let the office know."
- At the last inspection staff told us they did not always check on the EMAR what medicines they were giving a person. At this inspection staff told us how they administered medicines safely. At the last inspection staff told us they did not always check on the EMAR what medicines they were giving a person. At this inspection staff told us how they administered medicines safely and how they would report any discrepancies between the medicine stock and EMAR to the registered manager.
- At the last inspection staff were not always aware of when to give 1 or 2 tablets for pain relief. At this inspection staff told us how they knew how much pain medicine to give a person if they are prescribed 1 or 2 tablets and had to document how much was given. One staff member told us, "If [person] asked for pain medicines. I ask them how bad their pain is, from 1 to 10. If it's low, I will ask if they want 1 tablet. I must write down how much I give in the notes for other staff to follow. "
- At the last inspection the registered manager nearly put a different dose on the EMAR to what was written on the pharmacy label which would have been against the law. At this inspection the registered manager told us they know they are unable to change a medication dose.
- During the last inspection the registered manager told us only one person transcribed information from the pharmacy label to the EMAR and no one checked it. At this inspection they told us they have a system in place to check information from a medicine box is transcribed correctly onto the EMAR and another manager checks it before use and we saw evidence of this.

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 this key question was rated requires improvement. We have not changed the rating as we have not looked at all of the well-led key question at this inspection.

The purpose of this inspection was to check if the provider had met the requirements of the warning notice we previously served. We will assess the whole key question at the next comprehensive inspection of the service.

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

At our last inspection the provider failed to ensure governance processes and quality assurance systems were operated effectively to assess, monitor and mitigate risks to improve the quality and safety of care. This was a breach of Regulation 17 (Good governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. At this inspection we found improvements had been made and the provider was now meeting this regulation

- The provider's governance systems were effective and enabled them to continually assess, monitor and improve the quality and safety of the service.
- At the last inspection some audits were not thorough or regularly undertaken and therefore ineffective. At this inspection the provider had improved the governance and auditing systems to ensure there was better oversight of the service and audits were carried out at regular intervals.
- At the last inspection the registered manager did not have effective oversight of people's medicine administration or the practices of care staff when administering medicines. At this inspections staff told us how they administered medicines safely and the registered manager showed us how they manage the oversight of people's medicines on a daily basis.
- At the last inspection we found conflicting information in people's care plans. At this inspection we saw care plans no longer contained conflicting information, and care plans were audited regularly to identify issues within care plans.