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Home Care Service Provider

Inspection report

310, Haydons Road
Wimbledon
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Ratings

Overall rating for this service

Good 

Is the service effective?

Good 

Is the service well-led?

Good 

Overall summary

We carried out an announced comprehensive inspection of this service on 29 May 2015. Two breaches of legal requirements were found. After the comprehensive inspection, the provider wrote to us to say what they would do to meet legal requirements in relation to these two breaches. The first breach was to do with ensuring people were protected against the risks associated with unsafe care and support as staff had not received all the necessary training and support needed for them to carry out their roles effectively. The second breach was to do with ensuring people were protected from the risks of inappropriate or unsafe care because there were not effective systems in place to regularly assess, monitor and improve the quality of the service provided.

The provider sent us an action plan and told us they would make the necessary improvements by the end of October 2015. We undertook this focused inspection 8 January 2016 to check that they had followed their plan

and to confirm that they now met legal requirements. This report covers our findings in relation to those requirements and to one area of staff support that required improvement. You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Home Care Service Provider on our website at www.cqc.org.uk.

Home Care Service Provider is a domiciliary care service that provides personal care for people with personal care and support needs. There were 33 people using the service when we visited.

The service had a registered manager at the time of the 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

Summary of findings

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.'

At this inspection we found the provider had followed their action plan and the legal requirements had been met. We saw there was in place a new staff supervision system that meant staff received regular support and appropriate monitoring of their work. From our inspection of the records and from our discussions with staff we saw this new system was started in July 2015. Staff told us they received supervision on a three monthly basis that alternated between an individual supervision meeting and a "spot check". Staff told us they found the supervision process supported them more effectively with their work.

We saw improvements in the training of staff had been made. Training records for staff evidenced that training included moving and handling; safeguarding; medication awareness; first aid; food hygiene and health and safety. We found the induction training programme for new staff had also been revised and updated. Staff told us they found the new training programme both interesting and helpful for them in carrying out their work.

The registered manager told us all staff had an appraisal of their work that included an assessment of their training needs for the year ahead. We saw staff records that evidenced this.

The actions the provider had taken to ensure the training and supervision of staff were improved was effective. We have re-assessed the rating for 'Is the service effective' from requires improvement to good.

The provider had arrangements in place to assess and monitor key aspects of the service. Our inspection of the records showed that in November 2015 there was a quality assurance feedback survey of staff and of people who used the service. The results we saw were positive. The registered manager had implemented other quality assurance methods such as "spot checks" and telephone calls to people to check on their satisfaction of the services they received. These also included checks on recruitment practices, supervision practice, staff training, and client file reviews to ensure care plans and care reviews were up to date. We saw evidence that where targets had not been met, prompt remedial action was taken.

Records showed that team meetings were taking place frequently and at times to suit the different working patterns of the staff.

The actions the provider had taken have helped to ensure the quality assurance systems were more effective. We have improved the rating for 'Is the service well led' from requires improvement to good.

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 effective?

The service was effective. A newly implemented staff supervision and appraisal process meant that staff were appropriately supported by management and their work monitored to ensure it was effectively carried out.

Access to training was also improved so that the range of training support available for staff included the essential areas of knowledge and skill required for staff to do their work.

Good



Is the service well-led?

The service was well-led.

The provider had systems to assess and monitor the quality of the service provided and these were being used effectively so areas for improvements were identified and addressed.

People were asked for their opinion of the service and these were acted on.

Good



Home Care Service Provider

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.

We undertook an announced and focused inspection of Home Care Service Provider on 8 January 2016. We told the provider one day before our visit that we would be coming. We did this because the registered manager is sometimes out of the office supporting staff or visiting people who use the service. We needed to be sure that they would be in. One inspector undertook the inspection.

This inspection was done to check that improvements we asked the provider to make in relation to the breaches of regulations we found after our comprehensive inspection on 29 May 2015 had been made.

We inspected the service against two of the five questions we ask about services: Is the service effective? Is the service well led? This is because the service was not meeting legal requirements in these areas.

This inspection was carried out by one inspector.

We reviewed the information we had about the provider prior to our visit and we looked at the previous inspection reports and reviewed these in line with the action plan the provider submitted to the Care Quality Commission. We also looked at notifications that the service is legally required to send us about certain events such as serious injuries and deaths.

We gathered further information by visiting the provider's office and spoke with three people who used the service, the registered manager, the owner and proprietor, the office manager and three members of staff. We reviewed the care records of three people, three staff records and we inspected records related to the management of the service.

Is the service effective?

Our findings

On 29 May 2015 we inspected the service and found it was in breach of the regulations. The provider did not support staff through effective supervision and staff had not received an annual appraisal. The Home Care Service Provider's policy for staff supervision stated it should occur six times a year and staff should receive an annual appraisal. We spoke with the registered manager about this at the time and they explained they were looking at new ways to ensure staff received regular supervision and annual appraisal. At this inspection we found the provider had improved this support given to staff.

At our inspection of the service on 29 May 2016 we also found that access to staff training and the range of training available for staff needed to be improved. At this focussed inspection improvements in these areas of training had been made.

The registered manager told us that immediately after the last inspection they conducted a review of the support structures in place for staff. They also obtained advice to help them implement effective practices to ensure improvements were made. At this inspection we found that improvements were made and good practices fully embedded. Staff now received supervision on a three monthly basis that alternated between an individual supervision meeting and a "spot check". This was a method of monitoring staff's performance in people's homes who they provided care and support for. Staff we spoke with confirmed they received regular supervision in this way. One member of staff said, "This is much more effective now in the way we are supported, I get regular supervision and it's so much better than before." Staff told us they found the

new supervision process supported them more effectively with their work. Staff told us they were provided with a copy of their supervision notes that they said provided a useful record for them of what was discussed in the meeting. We saw records of both these types of staff supervision in the staff files we inspected. The records we saw had been signed by both the staff member and the supervisor.

The registered manager told us as part of the new staff support system staff had all had an annual appraisal. This was evidenced in the records we saw and this included an assessment of staff's training needs for the year ahead. The new supervision and appraisal system meant that staff were appropriately supported by management and their work monitored to ensure it was effectively carried out.

We saw training records for staff that included training in all the areas deemed as being necessary by the provider for staff to work effectively with people. These included moving and handling; safeguarding; medication awareness; first aid; food hygiene and health and safety. One member of staff told us, "Access to training is much better, what we can do has increased and the training is more useful. It helps us to do our jobs better which is what we want. I've learnt a lot from the training I've done." The registered manager told us the programme for staff induction as well as training for staff had all been reviewed and revised. We inspected the records for the new induction programme and can confirm this.

The actions the provider took to ensure the training and supervision of staff were improved was effective. We have re-assessed the rating for 'Is the service effective' from requires improvement to good.

Is the service well-led?

Our findings

On 29 May 2015 we inspected the service and identified a breach of the regulation in relation to quality assurance because the provider did not have effective systems or processes in place to assess, monitor and improve the quality and safety of the services provided. At this inspection we found the provider was meeting the requirements of the regulations.

At the inspection in May 2015 we saw that some records were duplicated and different systems were in place for the same purpose. An example of this was to do with staff recruitment where there were two different processes being used, which had led to confusion and inconsistent practices. The registered manager told us they had carried out a full review of all recording processes and quality assurance methods in the office so that there were effective systems in place to ensure a consistent level of quality and safety with the services provided to people.

At this inspection we found that a complete review had been undertaken of all these systems and of the recording processes in use in the office. Where there was duplication in the processes being used these had been deleted. We found there were clear and much improved quality assurance and recording systems in place at this inspection. The improvements in these systems meant that access to information was easy and all the information was available in a logical and systematic way. An example of this included staff files. Recruitment information was clearly filed with a recruitment checklist available at the start of the section. This enabled a quick and effective check that all the necessary stages of recruitment practice had been completed. Staff supervision records were clearly

filed in chronological order, signed and dated by both parties. Training records were filed and a list of training staff had completed was in place. This provided easily accessible information for the manager to see where training needs existed and what training had been completed. People's care files that we inspected were equally clear and care plans and care reviews were all up to date and easy to access. All the files we inspected at this inspection were similarly ordered with information easy to access, clear and comprehensive.

At the inspection in May 2015 we found that there was not a method in place where staff views about the service could be gathered. At this inspection we saw that the registered manager had expanded the quality assurance survey we saw at the last inspection to include a survey of the staff (November 2015) so that their views could also be considered as part of ensuring a good quality service. The results we saw were very positive. Where comments were made and actions needed these had been responded to appropriately by the registered manager. For example a suggestion made by staff was to improve communication between them and the office. This was made to inform people promptly where care calls were late due to delays. As a result of this a new and effective call system and been introduced.

We looked at the minutes of the team meetings, these showed that more frequent meetings were taking place and at times to suit the different working patterns of staff.

The actions the provider had taken have helped to ensure the quality assurance systems were considerably more effective. We have improved the rating for 'Is the service well led' from requires improvement to good.