

BGS Healthcare Ltd

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Inspection report

The Stables
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22 November 2019

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08 January 2020

Ratings

Overall rating for this service

Inspected but not rated

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

BGS Healthcare Ltd. is a domiciliary care service. It provides personal care to people living in their own homes and flats. BGS was supporting 107 people in their homes 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

Following our last inspection, we served a warning notice in relation to safe management of medicines. At this inspection we found that the provider had met the warning notice however still required further improvement regarding quality assurance of medicine management. We will follow this up at the next inspection.

The service had implemented monthly medication audits in order to maintain oversight of medicine administration. We saw audits in place to monitor medicines management were not always robust.

Peoples were supported to manage their medicines safely. Staff received training in medicines management and were knowledgeable about safe medicine administration.

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 22 August 2019). There were multiple breaches of regulation. The provider completed an action plan after the last inspection to show what they would do and by when they would have improved.

Following our last inspection, we served a warning notice on the provider and the registered manager. We required them to be compliant with Regulation 12 (safe care and treatment) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 by 30 September 2019.

Why we inspected

This was a targeted inspection based on the warning notice we served on the provider and the registered manager following our last inspection. CQC are conducting trials of targeted inspections to measure their effectiveness in services where we served a warning notice. The provider completed an action plan after the last inspection to show what they would do and by when to improve the governance of the service.

We undertook this targeted inspection to check they had followed their action plan and to confirm the service now met legal requirements. This report only covers our findings in relation to medicines

management at the service. The overall rating for the service has not changed following this targeted inspection and remains requires improvement. This is because we have not assessed all areas of the key questions.

Follow up

We will continue to monitor information we receive about the service until we return to visit as per our re-inspection 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?

The service was not always safe.

Details are in our safe findings below.

Inspected but not rated

Is the service well-led?

The service was not always well-led.

Details are in our well-Led findings below.

Inspected but not rated

BGS Healthcare Ltd

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 Care Act 2014.

Inspection team

This inspection was carried out by one 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.

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 or registered manager would be in the office to support the inspection.

What we did before the inspection

Before this inspection, we reviewed the information we had received since the last 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. We took this into account when we inspected the service and made the judgements in this report.

During the inspection-

We spoke with six members of staff including care staff, the registered manager and nominated individual.

We reviewed 10 people's medication records and medication care plans. We reviewed a number of other documents relating to the 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 the last inspection this key question was rated as requires improvement. At this inspection this key question has remained the same. We have not changed the rating as we have not assessed all of this key question area. We will assess all of the key question at the next comprehensive inspection of the service.

The purpose of this inspection was to check if the provider had met the requirements of the warning notice. Enough timely action had been taken and the provider was no longer in breach of regulation 12 (Safe care and treatment) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 in this key question.

The remaining breaches found at our last inspection in this key question will be reviewed at our next scheduled inspection. This is to allow the provider time to embed their improvements.

Using medicines safely

- At our last inspection, medicines were being dispensed into a pot and left for people to take independently. This included people who had been identified as requiring assistance due to short term memory loss. During this inspection, we found that this was no longer taking place.
- Staff had received additional face to face training in medicines management since our last inspection. Staff told us this training was useful and informative.
- The registered manager had implemented a new system for disposing refused or disused medicines, staff we spoke with were knowledgeable regarding the safe disposal of medicines.
- The service had implemented a new digital system to monitor medicines administration. This alerted the management team to any missed medicines in real time. This meant concerns regarding medicines administration could be addressed in a timely manner.
- Peoples care plans detailed the level of support each person needed with medicine management.
- Staff we spoke with were knowledgeable about safe administration and storage of medicines.

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 remained the same. We have not changed the rating as we have not assessed all of this key question area. We will assess all of the key question at the next comprehensive inspection of the service.

The purpose of this inspection was to check if the provider had met the requirements of the warning notice. Whilst there were still further improvements needed, we found that enough timely action had been taken and the provider was no longer in breach of regulation 12 (Safe care and treatment) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 in this key question.

The remaining breaches found at our last inspection in this key question will be reviewed at our next scheduled inspection. This is to allow the provider time to embed the improvements.

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

- Since our last inspection, the manager had implemented a monthly medicines audit. This audit used a report printed from the digital medicines management system and identified any gaps in recording or codes to signify the person did not have their medicine.
- Gaps in the MAR (medication administration records) were investigated appropriately. Where concerns were found, they were addressed with staff promptly.
- Codes signifying that people did not have their medication were not investigated. This meant that some inconsistency in medicines recording were not always identified. For example, we saw three people frequently had a code in their MAR used to indicate medicine was unavailable. We saw that people also had the medicine signed as administered in between this code for one or two days at a time, on several occasions. The service had not taken appropriate action to investigate the recorded difficulties in accessing medicine or the inconsistencies in recording.